MASSEY COLLEGE
RTO: 45738 CRICOS: 03939B

T: 03 9008 4088
M: admissions@massey.edu.au
W: www.massey.edu.au
A: Suite 2 Level 3, 398 Lonsdale St, Melbourne VIC 3000

Student Contact Details Form

1. Personal Details

Student ID No.: _____ **USI No. (IMPORTANT):** _____

☐ **Male** ☐ **Female** **Date of Birth:** __/__/___ (Format: DD/MM/YYY)

Family Name: _____ Given Name(s) _____;

Home Phone Number: _____

Mobile Phone Number _____

Email (please write in CAPITAL letters in following box) | |

2. Address

Residential Address: _____

Town/Suburb: _____

State/Country: _____ Postcode: _____;

If your residential address is different to your postal address, please enter your residential address below:

☐ As Above

Residential Address: _____

Town/Suburb: _____

State/Country: _____ Postcode: _____;

3. Emergency Contact in Australia (Must be filled)

Relationship:

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Name:

Contact Number: Address:

Email (please write in CAPITAL letters in following box):

4. Emergency Contact in Home Country (Must be filled if you are an international student)

Relationship:

Name:

Contact Number: Address:

Email (please write in CAPITAL letters in following box):

5. Consent to Use Photographs and Video Footage

I, _____, (print name) give consent to Massey College to use photographs and/or video footage of me for the purposes of marketing and promoting the institute onshore and offshore. I may be identified by my first name only. The photographs and/or video footage may be published on the Institute's website, brochure and any other promotional materials.

I authorize Massey College to send me information about the institute, course, my attendance, my course progress and my academic results to my personal email address.

I give permissions for the Institute to call for urgent medical treatment for me in an emergency.

My contact details are correct and I am aware that I must tell the institute of any change in address, email address or phone number.

Student Signature: _____ Student Number: _____

Date: _ _ / _ _ / _ _ _ _ (Format: DD/MM/YYYY)