



Change of Details

I am a student of THA and wish to advise a change of:

- Name (Please provide proof of change of name)
- Home Address
- Contact Details

Family Name:(Current)		Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
Given Name:(Current)		Date of Birth:
Student ID No:	Group:	Mobile:
Email:		
Course:		
(If Applicable)		
Family Name:(Updated) _____		
Given Name:(Updated) _____		
New Contact Details:		
Address Line 1: _____		
Suburb: _____	Post Code: _____	State: _____
Home Ph: _____	Mobile: _____	Email: _____

Student Name:

Student Signature

Date:

OFFICE USE ONLY

Details Updated: Yes No

Staff Name: _____

Signature: _____

Date: ____ / ____ / ____