# Personal Details Amendment Form

Before completing this form please read ‘Section H: General Information for information and instructions regarding how to advise any changes to your personal details.

## Student Identification Details

|  |  |  |  |
| --- | --- | --- | --- |
| Full Current Name |       | UD Student ID |       |
| Unique Student Identifier (USI)[*Refer to the Australian Government USI website*](https://www.usi.gov.au/) [ ]  I permit my College and University of Divinity staff to verify and view my USI details. |       |
| Course |       |
| UD College/School |  |
| The date you submitted your admission or most recent re-enrolment form |       (dd/mm/yyyy) |

If you hold a student visa, any amendment to course or unit enrolment may affect the status of your student visa. You are required to seek prior approval from the Department of Home Affairs or its equivalent for certain course changes or before commencing a new course or changing courses. The University of Divinity will report any changes to the Department of Home Affairs.

## Citizenship Details or Visa Type Change *(mark one box, Visa holders must attach a copy of their current visa)*

|  |
| --- |
| **Domestic** |
| [ ]  | Australian citizen | [ ]  | NZ citizen |
| [ ]  | Australian permanent visa holder  | [ ]  | Permanent humanitarian visa holder |
| [ ]  | Pacific engagement visa (PEV) holder |
| **Overseas** | **Visa Name** | **Expiry Date** |
| [ ]  | Hold current visa choose from the list🢥 |  |    /  /     |

## Medical/Disability Update

If you have an additional disability or medical condition which means that you may require additional help during your study, it is important to provide the following updated information. This information will be kept confidential and will not affect your enrolment.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have a disability, impairment and/or long-term health condition that may affect your studies? | [ ]  | Yes | [ ]  | No |
| If you answered ‘Yes’ to the above question, please indicate the area/s. |
| [ ]  | Hearing | [ ]  | Mobility/Physical | [ ]  | Intellectual | [ ]  | Learning |
| [ ]  | Mental Health | [ ]  | Brain injury | [ ]  | Vision | [ ]  | Medical |
| [ ]  | Neurological | [ ]  | Other: |       |
| Might your disability/medical condition require reasonable adjustments to be made to support your learning? If yes, please complete a [Student Support Plan](https://divinity.edu.au/documents/student-support-plan/) and submit it together with this Admission Form to your Course Advisor. | [ ]  | Yes | [ ]  | No |

## Personal Details Amendment *(Only complete the details which have changed.)*

### Change of name

For a change of name, attach a certified copy of the evidence. Students on visas must advise a change of address within 7 days, or risk breaching visa requirements.

|  |  |  |
| --- | --- | --- |
|  | **Current details recorded by the University** | **New details** |
| *Log into* [*Paradigm*](https://uod.edu.net.au/php/student_summary.php) *to check your current name details* | Date implemented from |       (dd/mm/yyyy) |
| **Current** | **New** |
| [ ]  | Title |       | New title |       |
| [ ]  | Family name |       | New family name |       |
| [ ]  | Given first name |       | New given first name |       |
| [ ]  | Given middle name(s) |       | New given middle name(s) |       |
| [ ]  | Preferred name |       | New preferred name |       |
| **Australian Taxation Office and USI Registry** |
| [ ]  | I confirm that I have advised the Australian Taxation Office and USI Registry of my new name and it has been accepted. |

### Reason for change of name

Please indicate the reason for the change of name and note the documentary evidence required to confirm your details.

|  |  |  |
| --- | --- | --- |
|  | **Reason** | **Documents required** |
| [ ]  | Official name change | *Provide marriage certificate or change of name certificate* |
| [ ]  | Correction to name recorded on Paradigm | *Provide marriage certificate, change of name certificate, passport or birth certificate.* |
| [ ]  | Addition of an extra name | *Provide marriage certificate, change of name certificate, passport or birth certificate.* |
| [ ]  | Change of preferred name | *No documentary proof is required.* |

## Contact Details Amendment

Indicate the details which have changed and only complete that information

|  |  |
| --- | --- |
| [ ]  | **Change of contact details** |
|  | Date implemented from |       (dd/mm/yyyy) |
|  | [ ]  | Contact details | Email |       |
|  |  |  | Mobile |       |
|  |  |  | Home phone |       |
|  |  |  | Day phone |       |
|  | [ ]  | Residential address – Current ‘in semester’ address where you reside or will be residing when undertaking your study. No PO Box. | Address line 1 |       |
|  |  |  | Address line 2 |       |
|  |  |  | Town/Suburb |       |
|  |  |  | State  |       |
|  |  |  | Postcode  |       |
|  |  |  | Country  |       |
|  | [ ]  | Permanent address – Residential where you permanently reside, i.e. where you come from & not a temporary semester address. Can be same as ‘in semester’ address. No PO Box.  | Address line 1 |       |
|  |  |  | Address line 2 |       |
|  |  |  | Town/Suburb |       |
|  |  |  | State |       |
|  |  |  | Postcode |       |
|  |  |  | Country |       |
|  | [ ]  | Postal address – Where you would like hardcopy mail sent. Can be a PO Box. | Address line 1 |       |
|  |  |  | Address line 2 |       |
|  |  |  | Suburb/town |       |
|  |  |  | State  |       |
|  |  |  | Postcode |       |
|  |  |  | Country |       |
|  | [ ]  | Emergency contact  | Name |       |
|  |  |  | Relationship |       |
|  |  |  | Contact phone. |       |

## Privacy information

The information on this form is collected for the primary purpose of assessing your application or re-enrolment. Other purposes of collection include the creation of a record on the student database, attending to administrative matters, corresponding with you, and statistical analyses. If you choose not to complete all the questions on this form, it may not be possible for the University of Divinity to assess your application or re-enrolment. All sensitive and personal information will be handled in accordance with the University’s Privacy Policy. Personal information may be disclosed to authorised bodies and the permitted purposes for which such personal information may be used, as authorised by the Higher Education Support Act 2003. For details of the privacy and collection statement that applies to this form, please go to <https://divinity.edu.au/privacy>.

You have a right to access personal information that the University of Divinity holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about handling of your personal information, please contact the University of Divinity at enquiries@divinity.edu.au.

## Student acknowledgment

|  |
| --- |
| All information given to support this enrolment amendment (change of personal/contact details), including supporting documentation and certificates, is to the best of my knowledge correct and complete in every particular |
| Name/Signature |       | Date |        |
| Type name for electronic submission | (dd/mm/yyyy) |

## General Information

### Introduction

*Please read these instructions before completing this form.*

*Reminder: It is your responsibility to ensure that your enrolment details are correct prior to the relevant census date.*

*The University requires that your full legal name as it appears on your birth certificate/passport is recorded on your University record.*

### Contact and personal details

*Please ensure that your email address remains current as this will be the primary method of communication with you.*

#### Changed name or citizenship status

If you have changed your name or citizenship status since enrolling you will need to submit certified documentary *evidence, such as marriage certificate, change of name certificate, passport or birth certificate.*

*If relevant to you please indicate that you have advised the Australian Taxation Office and USI Registry.*

### Overseas students

*Students on visas must advise a change of address within 7 days, or risk breaching visa requirements.*

*If you are an overseas student studying in Australia on a student visa you must be enrolled in a full-time course.*

*All overseas students on any visa type must advise of a change of visa type.*

### Enrolment verification

*Students are encouraged to check their contact details via Paradigm.*

### Submission

*Complete, sign and send or email to your Home College/School.*

## Your Checklist

Student to complete

Note: Course and unit transfers cannot be processed using this form. Please see your Course Advisor.

|  |  |
| --- | --- |
| [ ]  | For changes of name, documentary evidence of the new name is included. |
| [ ]  | If relevant, ATO and USI Registry are advised of the change of name |
| [ ]  | **All students:** Please ensure that you have signed the declaration. |

## College/School Checking and Approval

|  |
| --- |
| ***College/School Office Administration***[ ]  Approved[ ]  Certified evidence regarding changes of name or citizenship[ ]  ATO and USI Registry are advised regarding a change of name. *Note: form cannot be processed if this is not confirmed*[ ]  Certified evidence of visa & passport enclosed, and current details entered or updated in Paradigm (*if applicable)*[ ]  Entered in Paradigm, where applicable (name changes are keyed by OVC) |
| *Name* |       | *Signature* |       | *Date* |    /   /      |