

Email(s)*:

Phone (Land Line)*:

--	--	--	--	--	--	--	--	--	--

Mobile Phone*:

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In case of emergency (ICE), person to be contacted in Australia:

Name:

Phone:

--	--	--	--	--	--	--	--	--	--

Next of kin (Name)*

Relationship

(Father/Mother/Spouse etc)

Next of Kin contact

details* (Country

code/Area code/

Telephone no)

ADDITIONAL INFORMATION

Father's Name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mother's Name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Permanent Overseas

Home Address (including

Town, State, Country):

Post Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Phone Number (Country

code/Area code/

Telephone no):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email:

INFORMATION ACKNOWLEDGEMENT

(Please tick box that you understand)

☐ I acknowledge that the information provided in this form is true and correct.

☐ I understand that it is my responsibility to notify Rhodes College within 7 days if there are changes to any of my contact details (like address, phone, mobile and email) occur, as per my Student Visa conditions.

Student Signature:

Date:

OFFICE USE ONLY

Date received:

Date processed:

Data entered on PRISMS? ☐ Yes ☐ No

Data entered on CLARITY? ☐ Yes ☐ No

Staff Signature:

Date: