

Change of Personal Details Form

Change of Personal Details

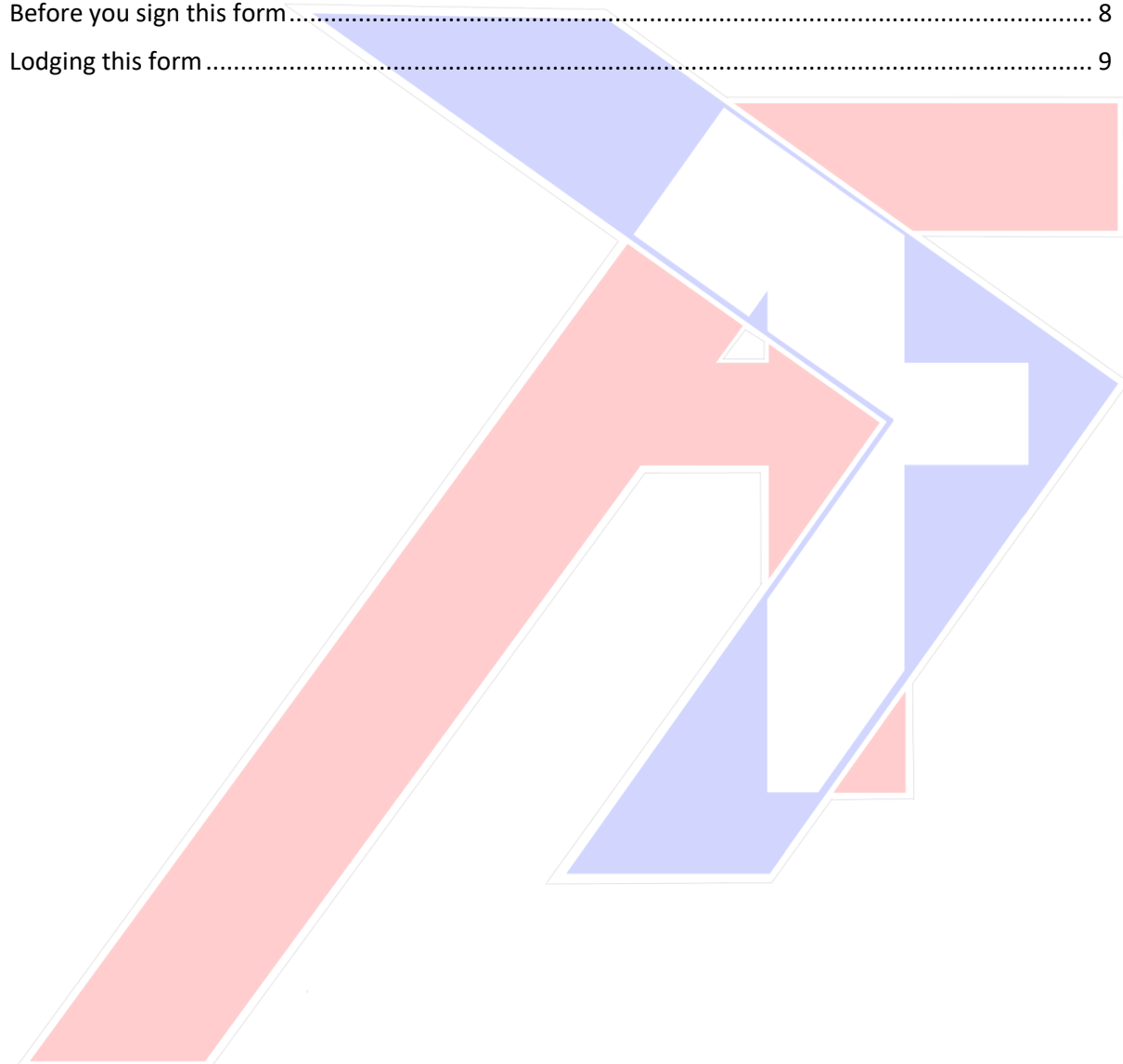


Advance-**F**orward

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You can update your personal details such as your new address and contact details. Just fill out the form and email it back to admin@adv-fwd.com.au

If you are unable to update your details online or you are having computer troubles please feel free to call us on (07) 3133 0249 and one of our friendly staff will update your details.

Alternatively, you can use this form if you want to:

- Update your name, address and contact details held by Advance-Forward Pty Ltd enrolment, re-enrolment and or refresher's and upgrades.
- Nominate another person (your representative) to deal with us on your behalf and receive information about your enrolment or personal details affairs.

We will endeavour to update your details as soon as possible. Please allow up to 10 working days for your information to be updated.

PLEASE READ CAREFULLY

- Only you can nominate a representative to deal with us on your behalf and receive information about your education, enrolment and personal details affairs
- If you have not authorised someone on your behalf you will have to fill out an authority form to allow your nominated person to update your details on your behalf.
- You may send the change of personal details form along with the authority form at the same time to complete the updates.

**PLEASE USE A BLACK OR BLUE PEN ONLY
USING BLOCK LETTERS**

WHEN COMPLETING THIS FORM

You **MUST** complete all sections and the questions where your details have changed in section B. If you are nominating a representative you will also need to complete section D.

All sections are compulsory and may help us to: (example)

- Reserve a car / motorcycle spot for you - so we will require your vehicle details
- Business details – For bulk training of your staff.

If you are filling in this form from a computer, mobile device, tablet or laptop screen then please remember to:

- When completed, print two copies
- Sign and date the declaration
- If mailing then mail the completed form to address shown on page 10
- Keep the second copy for your records.

If you are filling in this form by hand:

- Print clearly in BLOCK LETTERS using a black or blue pen only
- Place in the applicable boxes
- Do not use correction fluid
- Sign next to any corrections with your initials
- Sign and date the declaration at the end of the form
- Make a copy for your records
- Mail your completed form to the address shown on page 10

Find out more

- Phone (07) 3313 0249 between 0800 hrs and 1700 hrs Monday to Friday. If you phone, you will need to establish your identity by providing details of three items that are currently on our records, in order to update personal information for example:
 - Your date of birth
 - Your telephone number, business, residential, postal or email address
 - Password question set by yourself

Section A: Your current details with Advance-Forward

What is your full name?

Title: Mr Mrs Miss Ms Other

Family Name:

First Given Name: Middle Name:

Other Given Name/s:

1. Your address details.

Provide your full **POSTAL** address:

PO Box

Building Name:

Unit / Flat Number: House Number:

Street: Road / Avenue / Place / Crescent / Close Etc.

Suburb:

State: Town: (Brisbane, Townsville, Sydney,) Postcode:

Provide your full **HOME** address:

Building Name:

Unit / Flat Number: House Number:

Street: Road / Avenue / Place / Crescent / Close Etc.

Suburb:

State: Town: (Brisbane, Townsville, Sydney,) Postcode:

2. What is your date of birth?

Date of Birth: / /

Age:

Phone and email contact details

Where can we contact you or leave a message if we need more information?

(This section is compulsory)

Daytime phone number:

Mobile phone number:

After hours phone number:

Email Address:

Section B: Do you want to change your name or address details?

No Go to section 6.Yes Complete this section

3. What is your (NEW) full name?

Title: Mr Mrs Miss Ms Other Family Name: First Given Name: Middle Name: Other Given Name/s:

Please provide one of the following identity documents to support your change of name. It needs to be a certified copy. You may scan a copy and attach a certified copy to this document and return. If you post in this copy along with a certified copy then they will not be posted back.

PLEASE SEND US ONE OF THE FOLLOWING CERTIFIED SUPPORTING DOCUMENTS

- Australian full birth certificate (not an extract)
- Australian change of name certificate
- Australian marriage certificate
- Australian passport
- Australian visas (using information obtained from your foreign passport)
- Australian citizenship certificate or extract from Register of Citizenship by Descent (all pages must be provided)
- Australian drivers licence
- Australian medicare card

If you are a foreign resident and cannot provide one of the documents listed above, you can provide a certified copy of one of the following documents:

- National photo identification card
- Foreign passport
- Foreign birth certificate
- Foreign marriage certificate
- Foreign government identification
- Foreign drivers licence

4. What are your NEW address details?

PO Box

Building Name:

Unit / Flat Number:

House Number:

Street:

Road / Avenue / Place / Crescent / Close Etc.

Suburb:

State:

Town: (Brisbane, Townsville, Sydney,)

Postcode:

Provide your full **HOME** address:

Building Name:

Unit / Flat Number:

House Number:

Street:

Road / Avenue / Place / Crescent / Close Etc.

Suburb:

State:

Town: (Brisbane, Townsville, Sydney,)

Postcode:

Section C: Do you want to nominate a representative?

No Go to section D Yes Please complete this section

Please complete this section to nominate a representative (authorised contact) to deal with us on your behalf and receive information about your studies, update information or complete bookings on your behalf.

- Any nomination will continue indefinitely until you let us know it no longer applies or you cancel the nominated person/s.

5. Who is your representative?

Title: Mr Mrs Miss Ms Other

Family Name:

First Given Name: Middle Name:

Other Given Name/s:

Date of Birth: / /

Age:

Phone and email contact details

Where can we contact you or leave a message if we need more information?

(This section is compulsory)

Daytime phone number:

Mobile phone number:

After hours phone number:

Email Address:

Before you sign this form

Make sure you have answered all the relevant questions correctly and read the privacy statement below before you sign and date this page. If the form is not correctly and fully filled in there may be a delay in the processing procedure.

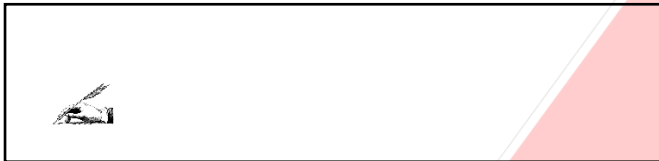
I declare that the information given on this form is true and correct.

OR

I declare that:

- This document has been prepared in accordance with information supplied by the individual
- I have received a declaration from the individual authorising me to complete this form and stating that the information provided to me is true and correct.

Signature:



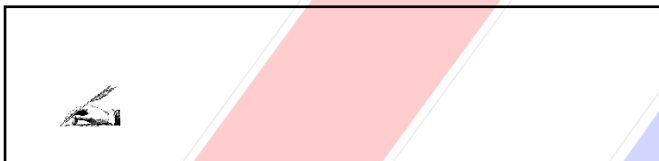
NOMINATED REPRESENTATIVE'S SIGNATURE

Write your full name in block capitals

Today's Date:

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day			Month			Year			

Signature:



APPLICANT'S SIGNATURE

Write your full name in block capitals

Today's Date:

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day			Month			Year			

Privacy:

Advance-Forward Pty Ltd agrees that the information collected will be kept safe and secure and will only be stored with Advance-Forward Pty Ltd and **NOT** shared with any other agencies or companies

Your personal information is protected by law, including the Privacy Act 1988. Important information about the collection, use and disclosure (to other agencies and third parties, including overseas entities) of your personal information, including sensitive information, is contained in the federal register of legislation <https://www.legislation.gov.au/Details/C2017C00283>

Lodging this form

Advance-Forward Pty Ltd advises all its clients / students / partners & others should keep a copy of this form for your records. You may send this form in to us a few different ways.

- Email it back to us
- Mail it back to us
- Hand deliver it (Bring it with you when you start your course)
- On site

Email: Print out this PDF form and write your details and scan it back to us along with your J.P signed copy of one of the documents listed in Section Four (4) on page Six (6). Please email it back to us A.S.A.P to the following email address: admin@adv-fwd.com.au

Mail: Print out this PDF form and write your details and mail it back to us along with your J.P signed copy of one of the documents listed in Section Four (4) on page Six (6). Please send it back to us A.S.A.P to the following address:

**Advance-Forward
PO Box 1988
SPRINGWOOD QLD 4127**

Hand Delivered: Print out this PDF form and write your details and mail it back to us along with your J.P signed copy of one of the documents listed in Section Four (4) on page Six (6). Please you may bring it with you when you sign up for a course or the commencement of your course. Our address where all courses are conducted is:

**Advance-Forward Pty Ltd
Unit 3, 6 Vanessa Blvd
Springwood
Brisbane Q.L.D
4127**

On Site: You may ask any member of our friendly staff who will be more than happy to print out a form for you and help you fill it in if required:

Signature:



APPLICANT'S SIGNATURE

Today's Date:

□ □	Day	/	□ □	Month	/	□ □ □ □	Year
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Write your full name in block capitals