

AUTHORISATION FOR RELEASE OF STUDENT ENROLMENT OR AWARD INFORMATION



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Student ID Number _____

Surname/Given Name(s) _____

Date of Birth _____ (DD/MM/YY)

Address _____

Contact No. _____

Email Address _____

Program of Study _____

Authorisation:

I _____, hereby authorise the University of Newcastle to provide information about the following:

Information about my award; Mark as appropriate

Information about my enrolment;
to the following agency _____.

Name of Person/Organisation:

Address:
City, State, Postcode: Country:
Relationship to you (i.e., parent, spouse, sponsor, agent, etc):

I acknowledge that the University of Newcastle may contact me to confirm the veracity of this document. This authorisation will be valid for 6 months from the signed date below, and will be added to my student account, for the information of administrative staff . I will contact the University of Newcastle if I wish to withdraw this authority before its expiry.

Signature
NEWCASTLE | CENTRAL COAST | PORT MACQUARIE | SINGAPORE | SYDNEY
Date
The University Of Newcastle
Callaghan NSW 2308 AUSTRALIA
15000-UoN-Enquiries@newcastle.edu.au T +61 2 4921 5000
CRICOS Provider Number 00109J www.newcastle.edu.au