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STUDENTS DETAILS UPDATE FORM			
SECTION 1 TO BE COMPLETED BY THE STUDENT:			
STUDENT NAME:		STUDENT ID:	
CURRENT COURSE:		INTAKE:	
1. DID YOU CHANGE RESIDENTIAL ADDRESS IN THE LAST 6 MONTHS?		NO or	YES (Provide details below)
Street number and name:			
Suburb:	Postcode:	State:	
2. DID YOU CHANGE	PHONE NUMBER IN THE LAST 6 MONTHS?	NO or	YES (Provide details below)
New phone number:			
3. DID YOU CHANGE	EMAIL ADDRESS IN THE LAST 6 MONTHS?	NO or	YES (Provide details below)
New email address:			
4. DID YOU CHANGE YOUR EMERGENCY CONTACT DETAILS IN THE LAST 6 MONTHS?		NO or	YES (Provide details below)
Emergency contact name: Emergency contact number:			
Emergency contact email:			
5. ARE YOU UNDER T	HE AGE OF 18 YEARS OLD?	NO or	YES
6. DO YOU REQUIRE US TO CONDUCT A WELFARE CHECK ON YOU AT YOUR RESIDENTIAL ADDRESS? (Administrative department to notify the academic manager via email for an urgent welfare check if the student requires so).		NO or	YES
7. DID YOU CHANGE	YOUR PASSPORT IN THE LAST 6 MONTHS?	NO or Please email students.services@kir copy of your new pass	YES ngstoncollege.wa.edu.au a sport.
STUDENT SIGNATURE:		DATE:	