



Change of Details Form

Use this form to notify the College of a change in names and/or contact details for students and/or parents.
Please return the completed form to the Administration Office.

Please note: This form is not to be used for notification of change to family status (eg: separation/divorce);
use the Change of Family Status Form for this purpose.

REASON FOR CHANGE: Change of Name _____ Change of Address _____ Change of Contact Details _____
(Certified copy of / or original document)

CHANGE AFFECTS: Student(s) _____ Father/Guardian _____ Mother/Guardian _____

Please complete CURRENT Name/s (or Former, if applicable):

Student 1 Full Name: _____ Tutor Group: _____ Year Level _____

Student 2 Full Name: _____ Tutor Group: _____ Year Level _____

Father/Guardian Full Name: _____ Lives With Student: Yes / No

Mother/Guardian Full Name: _____ Lives With Student: Yes / No

(Note: if more than 2 students in the family please attach an additional form)

NEW Details or Changes (as applicable):

Student 1 Full Name: _____

Student 2 Full Name: _____

Father/Guardian Full Name: _____

Mother/Guardian Full Name: _____

New Home Address: _____

New Home Phone No: _____

New Mobile No: Father: _____ Mother: _____

New Work No: Father: _____ Mother: _____

New Emergency Contact No: Father: _____ Mother: _____

New Email Address for correspondence: _____

NEW Emergency Contact Details:

Contact Title: Mr / Miss / Ms / Mrs Emergency Contact Full Name: _____

Relationship to Student: _____

Address: _____

Home Phone No: _____ Mobile No: _____

Parent/Guardian Name: _____ **Signature:** _____ **Date:** _____

FOR OFFICE USE: Received by: _____ Date received at College: _____

_____ Email copy to VASS Coordinator (Year 10, 11, 12 students only)

_____ Email copy to Finance

_____ Administration to update in Synergetic and file original in student records

vass@stpeters.vic.edu.au

finance@stpeters.vic.edu.au