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CHANGE OF CONTACT DETAILS FORM				
Student ID:		Student Full Name:		
Date of Birth:		Course Enrolled:		
Email address:			·	
*Please provide your email address as this is how Empyrean will communicate with you. If you do not have an email address, you will need to set one up.				
New Address (Address of Residence)				
Street:				
Suburb:			Post Code:	
Postal Address (If different from above)				
Street:				
Suburb:			Post Code:	
New contact details/email address				
Mobile:			Home Phone:	
E-mail:			Work Phone:	
Declaration				
I declare the information supplied on this form is correct.				
Student Signature:			Date:	
Office Use Only				
Received by:			Date Received:	
Updated by			Date updated	