

Change to personal student information form

Section 1: Instructions

Please note if you wish to access the personal information retained by UE, contact Student Services Officer on campus.

1. Use this form to request a change to the personal information retained by UE on your student record.
2. You will need to provide documentation to support your change request. Ensure that all required evidence is provided at the time of submission. Documentation requirements are indicated in each section.
3. Please submit this form to reception@ulgroup.com.au

Section 2: Current Student Information

Student Name: _____ Student ID: _____
 Student Email: _____ Student Mobile: _____

Section 3: Correction to student information

Update your legal name after an official change

Please indicate you have provided the following

Valid photo ID (showing former name) Proof of name change (e.g. Marriage certificate, court order)

Correction to your legal name or date of birth

Please indicate you have provided the following

Valid photo ID Proof of date of birth (e.g. Birth certificate)

Update to disability status

Please indicate you have provided the following

Medical Documentation (A letter from a licensed healthcare provider confirming the disability)

Diagnostic Reports Disability Certificate or Assessment including Verification of Ongoing Disability

Update to preferred given name, personal (gender) identifier or title/ Update to Emergency Contact

No additional documentation required

Section 4: Updated Student Information

Please indicate your correct/preferred details

Student Name: _____ Student Title: _____
 Student Identifier: _____ Date of Birth: _____
 Emergency Contact Name: _____ Relationship to student: _____
 Emergency Contact Number: _____ Email: _____
 Student Mobile: _____

I acknowledge that UE reserves the right to verify the information provided and may vary or reverse any change if it is found to be based on incorrect or incomplete information. By submitting this form, I consent to UE maintaining and processing the personal information provided for the purpose of updating student records in accordance with the UE Privacy Policy and Procedure. This information will be handled in strict compliance with privacy laws and institutional policies. These policies are available on our website www.ue.edu.au.

Student signature: _____ Date: _____ / _____ / _____

Section 5: Office Use ONLY

Received By: _____ Date Received _____

Action taken: Processed Additional Information requested

Processed by: _____ Date of Change _____