

Request for Access to Student Records Form

Instructions to Applicants

Please type or use BLOCK LETTERS when completing this form.

1. This form is to be completed by the student requesting access to their personal records.
2. It must be completed, signed and original forwarded to the Reception Area.
3. Return the completed form in person to

National Australian Institute of Technology Pty Ltd 373-375 Bridge Rd, Richmond, Victoria 3121, Australia
Telephone: +61 39428 1615 Email: info@nait.edu.au | www.nait.edu.au

4. Information will be provided in 7 working days.

Personal Details

Name:	
Date of Birth:	
Student ID:	
Course :	
Telephone / Mobile:	
Email Address:	
Document Requested:	
Reason:	

Acknowledgement

I understand that my application for access to my personal file is controlled by NAIT Privacy Policy.

Print Name:

Signature:

Authorisation

Authorisation for Processing					
Action to be taken:	Approved	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Access Date:
Comments:					
Print Name:		Position:			

Signature:

Date Processed: