

Department	CEAV Institute		Author(s)	RTO Training Manager	
Quality Controlled Document No. & Title	11.2	Access Confidential Records Forms by a third party	Approved	CEAV RTO Committee	
Version	V3, Sept, 2015		Authorised	CEO	
Standards for RTO's 2015	Standard 3 (Clause 3.4)		Distribution	Internal	RTO Manager RTO Staff RTO Candidates
				External	Prospective Candidates

APPLICATION BY STUDENT FOR ACCESS TO RECORDS BY THIRD PARTY

The purpose of this form is to nominate another person to collect items from CEAV Institute on my behalf. I understand that I may only authorise one person on this form. I may change these arrangements at any time by contacting CEAV Institute. The information I provide on this form will authorise my nominee to collect items on my behalf during the period I specify. I understand that I should only allow someone I trust to collect items on my behalf as CEAV Institute is not responsible for the security or use of your items once they have been collected.

Personal Details	
Surname/Family Name	
Given Names	
Postal Address	
State	Postcode
Country	
Telephone	
Mobile	
Email	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth	

Nominee's Details	
Name of Person/Organisation	
Contact Person	
Address	
Telephone	
Email	

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Student Declaration

I certify that all details provided on this application form are correct.

My authorisation:

I authorise CEAV Institute to provide my Nominee with the following items

By signing this authorisation, I acknowledge that:

- The information I have provided is correct;
- My nominee must provide photo ID at the time of collection to enable verification of their identity (for example passport, driver's licence);
- CEAV Institute will not release the items unless it is satisfied that the person is authorised.
- CEAV Institute accepts no responsibility for collected items once they have been collected by my nominee.

I want this arrangement to last: Indefinitely From ___/___/___ to ___/___/___

My Signature _____ Date _____

My nominee's acceptance:

By signing this authorisation, my nominee acknowledges that he/she understands and accepts:

- The responsibilities he/she has under this arrangement;
- That he/she will access, use and disclose personal information he/she receives only as authorised by the person to whom the information relates;
- That his/her appointment as nominee may be revoked if he/she does not comply with his/her responsibilities.

My nominee's signature _____ Date _____

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Office Use only

CEAV Institute

RTO Administrator to complete:

Application approved: Yes No

Signature _____ Date _____

Student Notified Date _____

The form is to be lodged either by post, email or fax to:
CEAV Institute Centre Manager,
Unit 3 192 B Burwood Rd, Hawthorn VIC 3122
Ph: (03) 9810 6400. Email: training@ceavtraining.edu.au

Privacy Declaration: CEAV Institute seeks this information for the purposes of processing your application. This information will only be used by the CEAV for the purposes for which it is intended. You have the right to access your records at any time by contacting the CEAV on Ph 03 9810 6400 during business hours or downloading the appropriate form on www.ceavtraining.edu.au

Complaints and Appeals: If at any stage during your application/ enrolment or course delivery/assessment you feel dissatisfied you have the right to complain or appeal any decision that you disagree with. All policies, procedures and forms for complains/appeals are available on www.ceavtraining.edu.au