

START NOW STUDY AUTHORISATION FORM

Before completing this form, please review the relevant course page which can be accessed via the CQUni Handbook (<https://handbook.cqu.edu.au>) or visit www.cqu.edu.au/sun (SUN website) or www.cqu.edu.au/stn (STN website). This form must be completed and uploaded as part of your supporting documentation within the Apply Online application.



STUDENT DETAILS

First Name		Last Name	
Phone		Email	
Unique Student Identifier (USI)*		Learner Unique Identifier (LUI)*	

Date of Birth / /

I am currently enrolled in Year 10 Year 11 Year 12

^LUI required only for students studying QCAA/QLD curriculum. *USI is a compulsory field - please check with school contact if unknown

PARENT/GUARDIAN DETAILS

I allow CQUniversity to release information from my student record to the following parent/s or guardian/s. These details are used as part of the identification process when the person contacts CQUniversity.

Name	
Address	
Phone	Email
Name	
Address	
Phone	Email

NOMINATED SCHOOL COMMUNICATION CONTACT

This section to be completed by High School senior staff member involved in School subject planning discussion. The person nominated will be the primary contact for CQU initiated communication and updates relating to this student.

School name
School phone
School contact person name
School contact person position title
Email of nominated school contact person

Signature of nominated school contact person

Date / /

Handwritten or digital/electronic signatures can be used on this form, however please note that typed signatures will not be accepted.

COURSE DETAILS

I am applying for admission into ...

Start TAFE Now (STN) program

The course/s I want to study is... (e.g. Certificate II in Hospitality)

or Start Uni Now (SUN) program

The unit (subject) I want to study is... (e.g. Human Anatomy and Physiology 1)

AUTHORISATION

In relation to my studies in the above mentioned CQUniversity unit/course, I consent to CQUniversity undertaking the following actions as required:

- » Sharing details of my enrolments, including but not limited to, my academic progress, non-attendance, conduct, assessment, support requirements, results and financial liability with my parents/guardians listed on this authorisation form.
- » Sharing details of my enrolments, including but not limited to, my academic progress, non-attendance, conduct, assessment, support requirements, results, and financial liability with any school staff from my high school listed on this authorisation form.
- » This form does not provide authorisation to access or release any counselling, accessibility, complaint, or Student Ombudsman records.
- » I acknowledge that if I revoke my consent for my high school to access my personal information during my enrolment in my Start Uni Now or Start TAFE Now course, I may be withdrawn from my Start Uni Now or Start TAFE Now course.
- » With my permission, any school staff from my high school or my parent/guardian noted on this authorisation form may change my enrolment, including but not limited to cancelling my course or dropping, adding, or swapping units, in consultation with CQUniversity staff.
- » The consent I provide under this form is effective from the date this form is signed. I acknowledge that I may later modify or revoke my consent by notice in writing to sun@cqu.edu.au or stn@cqu.edu.au.
- » I acknowledge I am signing this form of my own free will, on the full understanding of the terms and conditions, and I have had an opportunity to ask any questions.
- » If the individual noted within STUDENT DETAILS is under the age of 18, the undersigned parent/guardian warrants that they are the parent or legal guardian of the individual and have the authority to bind themselves and the individual on the terms set out in this form.
- » I/We agree to my child/dependant's involvement in the above-mentioned unit/course with CQUniversity.
- » I/We understand that a minimum of one parent/guardian details are required on this form, however only the parent/guardians listed on this form will be eligible to access information pertaining to the noted child/dependant's involvement in the above-mentioned unit/course with CQUniversity.
- » I/We agree to pay any fees associated with this unit/course if not subsidised or sponsored and acknowledge that I/We should review the CQUniversity Student Refund and Credit Balance Policy and Procedure (particularly section 6) to understand eligibility for a refund of fees paid.

Student's signature

Date

D	D	/	M	M	/	Y	Y	Y	Y
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Parent/Guardian signature

If student is under 18 years of age

Date

D	D	/	M	M	/	Y	Y	Y	Y
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Parent/Guardian Name

If student is under 18 years of age

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IMPORTANT PRIVACY INFORMATION

Personal information is collected, used, and stored by CQUniversity to facilitate the processing of this Start Now Study Authorisation Form, and for your studies and related activities. Commonwealth and state department require certain information about student details and activities to be reported or disclosed by the University. Any other provision of your information will only be authorised by you or required by law and in accordance with the Information Privacy Act 2009 (Qld) and the University's **Privacy Policy and Procedure**.

Students have the right to access personal information within CQUniversity held about them, subject to any exceptions in relevant legislations. Should any student wish to seek access to their personal information, they are to contact the Coordinator Records and Privacy via email: privacyrti@cqu.edu.au.