

OFFICE USE ONLY	
Date received	
Update database	
Update registration	
Details forwarded	



## Change in Details Form

**A. Student details**

Student number: \_\_\_\_\_ Student name: \_\_\_\_\_

Student contact number: \_\_\_\_\_

Please record the following changes to my registration:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Student declaration

***Please read carefully.***

I hereby certify that the particulars I have given on the Lifeline Community Care Queensland RTO Change in Details Form are correct.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: \_\_\_\_\_

**Once completed please return to LCCQ RTO on:**

Email: [rto@lccq.org.au](mailto:rto@lccq.org.au)

Fax: 07 3250 4704

Post: PO Box 491, Fortitude Valley QLD 4006

<b>Privacy Statement</b>
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Lifeline Community Care acknowledges and respects the privacy of individuals. We advise that the information you provide on this form is “personal information” as defined by the Privacy Act 1988 (“the Act”). The information is being collected for the purposes of registering you to receive training services. The intended recipient of the information is LCCQ RTO. The provision of information is voluntary, but if this information is not provided, the RTO may be unable to provide you with a training service. You have the right to have access to and alteration of, personal information concerning yourself in accordance with the Act (conditions apply). The information is being collected by the RTO and will be held by the RTO. Please direct any enquiries you may have in relation to this matter to the RTO.