

PARENT / GUARDIAN AGREEMENT



VICTORIA UNIVERSITY
MELBOURNE AUSTRALIA

If you are under the age of 18 at the time of your enrolment and you are studying VCE or VCAL, your parent or guardian is requested to complete and sign this form.

Please bring the completed form with you to your enrolment session and ensure it is submitted with your enrolment.

Please write in BLOCK LETTERS using a black or blue pen.

STUDENT TO COMPLETE

FAMILY NAME:		STUDENT ID:
GIVEN NAME:		DATE OF BIRTH: / / 19
STREET NUMBER AND NAME:		
SUBURB:	STATE:	POSTCODE:
COURSE NAME:		STUDY YEAR:
COURSE CODE:	LOCATION:	

PARENT/GUARDIAN TO COMPLETE

You must sign this form to allow the student mentioned above to undertake a course/unit(s) of study at Victoria University if they are undertaking VCE or VCAL.

PARENT/GUARDIAN'S NAME:		DATE OF BIRTH: / /
STREET NUMBER AND NAME:		
SUBURB:	STATE:	POSTCODE:
RELATIONSHIP TO STUDENT:		
EMERGENCY CONTACT PHONE - HOME:		MOBILE:

I confirm that the student mentioned above is in my care and I authorise him/her to enrol into a course/unit(s) of study at Victoria University. I further agree to pay all costs for the course/unit(s) of study for which this student enrolls (unless the student is otherwise sponsored or exempt from paying fees).

SIGNATURE OF PARENT/GUARDIAN:	DATE: / / 20
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CONTACT

Enquiries GOTOVU www.vu.edu.au/gotovu
Phone +613 9919 6100
Fax +613 9919 4429
Web www.vu.edu.au/future-students

STUDENT SERVICE CENTRES

City Flinders	Newport
City King	St Albans
Footscray Nicholson	Sunshine
Footscray Park	Werribee
Melton	

MAIL TO

Enrolments Office
St Albans Campus
Victoria University
PO Box 14428
Melbourne VIC 8001

PRIVACY INFORMATION

We collect your personal information in accordance with the Privacy Statement for students (www.vu.edu.au/current-students/student-essentials/commonly-used-forms) and the Privacy Policy (www.vu.edu.au/privacy).