



Advanced Education Australia Pty Ltd (AEA)  
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### CHANGE OF DETAILS

I am a student of AEA and wish to advise a change of:

- Name (Please provide proof of Change of name)  
 Home Address  
 Contact details

### CANDIDATE INFORMATION

Surname: (Current)		Date of birth: dd/mm/yyyy	
First name: (Current)		Gender: M <input type="checkbox"/> F <input type="checkbox"/>	Student ID No: _____
Mobile No:		Email:	
Course:			

### If Applicable

Surname: (Updated) \_\_\_\_\_

First name: (Updated) \_\_\_\_\_

New Contact details:

Address \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_ State: \_\_\_\_\_

Home phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

*Suburb		*State:		Post code	
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**Student Name**

**Student Signature**

**Date:**