



THIRD PARTY AUTHORITY FORM

This form MUST be completed by you if you wish to authorise a third party (someone else) to collect your official KOI documents. You must also complete and submit a Document Request Form with this form.

Under Privacy Legislation, KOI CAN ONLY ACCEPT Third Party Authority Forms submitted by a student or ex-student. (You cannot ask someone else to submit this form on your behalf.)

INSTRUCTIONS:

- 1. You must submit your signed and completed Third Party Authority Form to KOI Reception.
2. You will need to produce photo ID when submitting the forms to KOI Reception e.g. your KOI Student Card.
a. If you are emailing the forms because you cannot submit the forms in person, you MUST ATTACH a certified copy of your photo ID including your signature (Passport/Australian Driver License)
3. The authorised third party must present photo identification (Passport/Australian Driver License) when collecting documents for which they are authorised.

1. STUDENT DETAILS
Student Number:
Date of Birth: dd/mm/yyyy
Family Name:
Course:
Given Name(s):
Mobile No:
Student Email: Use your KOI Student email if a current student
KOI Official Use Only
Student Photo ID sighted
Type: Staff member Date: / /

2. THIRD PARTY DETAILS
Family Name:
Date of Birth: dd/mm/yyyy
Given Name(s):
Relationship to student
Address:
Mobile No:

3. AUTHORISATION DETAILS
By signing this form I authorise the release of the following documents to the person whose details and signature appear above.
Type of / Information (please tick)
Collection of Academic Transcript
Collection of Testamur
Collection of Letter Confirming Enrolment
Collection of Completion Letter
Collection of Release Letter
Other
Signature of Student
Date of Authorisation: dd/mm/yyyy



KOI OFFICIAL USE ONLY - KOI Reception Staff to complete on collection

Third Party Details

Family Name _____

Given Name(s) _____

Date of Birth ____/____/____ (dd/mm/yyyy)

Photo ID sighted Photo ID Type _____

Staff member _____ Date ____/____/____

Document(s) released _____

Third Party to complete

I confirm that I have received the above Document(s)

_____ **Print name** _____ **Signature**

Date ____/____/____
dd mm yyyy