

Consent Form

(For sharing personal details of a student with a third party)

I..... Student ID number.....

agree * to share my academic progression, academic grade, learning and development and attendance records (*including leave of Absence and withdrawals*) with parents / immediate family / guardians / agents

Mr..... and/or Mrs/Ms.....

Signature of Student _____
(name & signature)

Date _____
(day/month/year)

I do not agree to this consent *

Signature of Student _____
(name & signature)

Date _____
(day/month/year)

Please note that you may withdraw your consent for sharing the above mentioned information via sending an email to studentservices-singapore@jcu.edu.au

**Please check as applicable*

Students' consent is not applicable if they are below 18 years

Consent Form-v7.0-20182602