



VIITE

Victorian International Institute
of Technical Education
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USI Notification and Authorisation Form

From 01 January 2015 students undertaking Nationally Recognised Training delivered by a Registered Training Organisation (RTO) will need to have a Unique Student Identifier (USI). A USI gives students access to their online USI account which is made up of 10 numbers and letters (eg. 3AW88YH9U5). Please note that the Institute will not issue AQF certification documentation to an individual without being in receipt of a verified Student Identifier for that individual (Clause 3.6, Standards for RTOs (2015))

Personal Details (All personal details are protected under the relevant Privacy legislation)

Name (Please enter your legal name as it appears on your identifying document)

First Name: **Family Name:**

Date of Birth: **Gender :** Male Female
dd mm yyyy

Contact Details (All contact details are protected under the relevant Privacy legislation)

Residential Address **Not a post office address**

Street Address:
Suburb/ Town/ City : **State :** **Post Code:**
Telephone : **Mobile :** **Home /Work :**
Email :

Unique Student Identifier (USI) - the USI is protected under the relevant Privacy legislation Options (Select the appropriate option and complete the required details)

| | | | | |
|---|--------------------------|---|-------------------|----------------------|
| 1 | <input type="checkbox"/> | I have a USI and authorise the Institute to verify my USI | USI Number | <input type="text"/> |
| 2 | <input type="checkbox"/> | I do not have a USI as I have been unable to create my own USI. I hereby authorise Victorian International Institution of Technical Education to apply for a USI to the Registrar on my behalf. | | |

Select One (1) of the following forms of Personal Identification to support your application (must tick one) and attach a copy of the selected documents)

- | | | | |
|--------------------------|--|--------------------------|---|
| <input type="checkbox"/> | Driver's Licence (Australia) | <input type="checkbox"/> | Birth Certificate (Australian) |
| <input type="checkbox"/> | Medicare Card | <input type="checkbox"/> | Certificate of Registration By Descent |
| <input type="checkbox"/> | Australian Passport | <input type="checkbox"/> | Citizenship Certificate |
| <input type="checkbox"/> | Visa (With Non-Australian Passport) | <input type="checkbox"/> | Immicard |

Document Identification Number
Country of Birth **Town/ City of Birth**
Country in Which You Are Studying

Signature: _____

Date: _____

Please hand over this form to the Administration department or email it to admissions@viite.edu.au