

Macedon Ranges Education

Authority to Release Student Information

Instructions for completing this form.

Please complete the relevant section of the form.

- 1. For authorisation of release of information please complete Part 1.
- 2. For refusal of release of information please complete Part 2.
- 3. Sign and date the form and return it to service@exploreeducationandtraining.com.au.

☐ Part 1. Agreement to Release

Subject to the agreed terms and conditions of my enrolment with Macedon Ranges Education, I authorise the Education and Training Administrator, as delegated and authorised by Macedon Ranges Education to release any and all information pertaining to my enrolment.

My details are as follows:

Student Name:	Click or tap here to enter text.
Student Number:	Click or tap here to enter text.
Address:	Click or tap here to enter text.
Email:	Click or tap here to enter text.
Date of Birth:	Click or tap to enter a date.
Course Enrolled:	Click or tap here to enter text.
Date of Enrolment:	Click or tap here to enter text.



☐ Part 2. Refusal to Release

Subject to the terms and conditions of my enrolment with Macedon Ranges Education, I expressly refuse to give my authorisation to the Education and Training Administrator, as delegated and authorised by Macedon Ranges Education to release any and all information pertaining to my enrolment.

Click or tap here to enter text.
Student Signature
Click or tap here to enter text.
Print Name
Click or tap to enter a date.
Date