

USI Creation Consent Form

I give my consent to LIBERTY INSTITUTE OF HEALTH AND EDUCATION to register and obtain a **Unique Student Identifier (USI)** on my behalf with following details:

Student ID:								
First Name:				Last Name:				
Date of Birth:		City/Tov Birth:		wn of				
Street Address:								
Suburb:	<u> </u>	Sta		e:		F	Postcode:	
Contact Number:			1	In	-n		V	
Email Address:		7		-10			Ĭ	
Preferred Contact Method:		Email		0	Mail		Phor	ie
Document Verification Service(DVS) Document Type: (please tick types of documents provided) Please refer to the important information in the table below		 Driver's Licence Medicare Card Australian Passport Visa (With Non- Australian Passport) Birth Certificate (Australian) *please note a Birth Certificate extract is not sufficient Certificate of Registration by descent Immi Card Citizenship Certificate 						
Have you provided a proof of ID document? (Please tick)		○ Yes		○ No				
Date:								
Student Name:								
Signature:								



Important Information:

To create a Unique Student Identifier (USI) you will need to use a valid form of ID from the list. Your proof of ID will allow us to make sure that your records and results always go to your USI account and not someone else's with similar details.

There might be someone who has the same name as you in the same city or town or someone with the same name might have the same date of birth.

By using some details from a form of ID when you create your USI it allows us to identify you so we can make sure your USI is truly unique to you.

If you don't have a valid form of ID from the list above, please contact our friendly student support officers for further assistance.