

CANCELLATION OF THIRD PARTY AUTHORISATION & PRIVACY NOTICE**When to use this form**

Where you have previously provided another person or organisation with authority to update your personal details or make enquiries on your behalf when communicating with the Office of the Student Identifiers Registrar (OSIR) concerning your Unique Student Identifier (USI) account ('Authority') and you wish to cancel that Authority.

This form does not apply to parents or legal guardians of a child under 15 years of age. Parents and legal guardians of children under 15 have an automatic right to contact the OSIR on behalf of that individual, subject to passing proof of identity requirements.

Filling in this form

Filling in this form:

- Use black or blue pen.
- Print in BLOCK LETTERS.
- This form can only be used to cancel Authority to one person or organisation (specifying one contact person). If you would like to cancel Authority that you have provided to more than one person, you will need to submit separate forms for each.
- You are required to complete questions 1-13 of this form.
- For assistance with this form, please phone **1300 857 536**; or refer to our website which includes options for people with a hearing or speech disability as well as details about translating and interpreting services: www.usi.gov.au
- Once complete, please return this form and any supporting documents to OSIR:

Email: businessstrategy@usi.gov.au

Post: Office of the Student Identifiers Registrar
PO Box 9880
Adelaide SA 5001

Important information**PRIVACY NOTICE**

Your personal information is protected by law including under the *Privacy Act 1988 (Cth)* and the Australian Privacy Principles.

By requesting to cancel an Authority that you have previously provided to another person or organisation, the Authority will cease upon the latter of the date provided at question 9; or the date OSIR processes this form. The date the OSIR processes this form may be a later date than the date that you submit this form. The cancellation of this Authority cannot be retrospective (referring to personal information that may have been used by the OSIR or disclosed to other parties with your previous consent or where otherwise permitted by the *Privacy Act 1988*).

The OSIR's privacy policy provides details of how you may seek to access and correct your personal information and complain about a breach of your privacy. A copy of our privacy policy can be accessed on our website at:

usi.gov.au/documents/privacy-policy

YOUR DETAILS & CANCELLED AUTHORITY DETAILS

IMPORTANT: For this form to be accepted for processing, all questions are mandatory unless otherwise indicated on this form.

1a. Your Unique Student Identifier (if known)

Or

1b. Another form of proof of identity

- First/Given Name
- Middle Name (if applicable)
- Family/Last Name
- Date of Birth
- Country of Birth
- Town/City of Birth
- Email Address (if applicable)
- Mobile Number (if applicable)
- Home Phone (if applicable)
- Postal Address (if applicable)

2. Your NameMr Mrs Ms Miss Other _____

Family name

First name

Middle name/s (if applicable)

Or

Single name only

3. Your date of birth (DD/MM/YYYY)**4. Your contact details**

Your postal address

Your home phone number

Your mobile number

NOTE: If we are unable to establish a direct match of your personal details, we will contact you by phone to confirm your information.

5. Do you wish to cancel an Authority previously provided to a person or an organisation?

- Person - go to question 6
- Organisation - go to question 7

6. Cancel Authority to a person:Mr Mrs Ms Miss Other _____

Family name

First name

Middle name/s (if applicable)

Date of birth (DD/MM/YYYY)

Go to question 8

CANCELLED AUTHORITY DETAILS & DECLARATION**7. Cancel Authority to an organisation:**

Trading name of organisation and ABN

Organisation's street address or PO Box

8. What is your relationship with the person or organisation you are cancelling Authority to?

- Parent
- Guardian
- Spouse/Partner
- Sibling
- Solicitor
- Employer
- Training organisation
- Other _____

9. Cancelled Authority:

- As soon as possible*
- Cancel from*: DD / MM / YYYY

See Privacy Notice on page one about date of effect.*10. This declaration is made by:**

- The USI account holder – go to question 14
- An authorised third party – go to question 12

11. Third party authorisation

If the USI holder is unable to sign this form due to incapacity to provide Authority, a third party may sign the declaration where they are (please select):

- A holder of a current Enduring Power of Attorney** authorising this action
- Appointed under a current guardianship order or arrangement**

****IMPORTANT:** Certified copies of documents are required and must be attached to this form.

12. Details of third party signatory

Family name

--

First name

--

Middle name(s)

--

Relationship to USI Holder

--

Address

Phone number

--

13. Declaration

I declare the information provided in this form is complete and correct. **I cancel** the previous authority for the person/organisation named on this form to communicate with the OSIR on behalf of the USI holder.

I understand:

- OSIR's Privacy Notice (see page one).
- I can provide OSIR a new Authority form any time.
- Giving false or misleading information is a serious offence.

Signature: _____**Name:** _____**Date (DD/MM/YYYY):** _____
