

Authorisation for Disclosure of Information Form

Trade Training Group ta MultiSkills Training – RTO: 40846



By completing this form, you are authorising MultiSkills staff to share your training information including; Statement of Attainments, Certificates, Progress Reports and Attendance Records with the nominated third party.

If you wish to modify or revoke this authorisation, please send your request via email to info@multiskills.com.au

Section 1 – Student Details	
Full Name:	
Date of Birth:	
Contact Number:	
Email Address:	

Section 2 - Third Party Details	
Company Name:	
Contact Name:	
Email Address:	
Contact Number:	

Section 3 - Student Declaration			
I give permission for MultiSkills Training to exchange and disclose information to the third party listed above as in relation to my student records.			
Student Name:			
Student Signature:		Date:	

This is a controlled document and is uncontrolled when downloaded or printed in hardcopy format.

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