

When to use this form

Use this form to verify your place of study to assess your eligibility for Relocation Scholarship. If you do not provide evidence that you are attending a regional campus you may not qualify for Relocation Scholarship.

For more information, go to servicesaustralia.gov.au/relocationscholarship

Who should fill in this form

PART A – (Questions 1 to 5) – to be completed by the student.

PART B – (Questions 6 to 7) – to be completed by an authorised officer at the campus(es) you attend.

Important information

Check that all questions are answered and the authorised officer has signed and dated this form at **PART B** – question 7.

Make sure the authorised officer has placed their institution's official stamp in the space provided at **PART B** – question 7.

Filling in this form

You can complete this form on your computer, print and sign it.

If you have a printed form:

- Use black or blue pen.
- Print in BLOCK LETTERS.

PART A – to be completed by the student

1 Your Customer Reference Number (if known)

- - -

2 Your details

Family name

First given name

Second given name

Date of birth

/ /

Student Identification Number

3 Campus details

Provide details of the institution(s) and campus you are attending. If you are studying at two campus(es) you need to provide details of both campus(es).

3a – Campus 1

Name of educational institution
(for example, university name)

Campus location (address of physical location you attend)

.....

Postcode

Period of enrolment at this campus

From

To

/ /

/ /

3b – Campus 2 (if applicable)

Name of educational institution
(for example, university name)

Campus location (address of physical location you attend)

.....

Postcode

Period of enrolment at this campus

From

To

/ /

/ /

► Go to 4



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Privacy notice

4 You need to read this

Privacy and your personal information

The privacy and security of your personal information is important to us, and is protected by law. We need to collect this information so we can process and manage your applications and payments, and provide services to you. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to servicesaustralia.gov.au/privacy

Declaration

5 I declare that:

- the information I have provided in this form is complete and correct.

I understand that:

- Centrelink may collect my personal information from third parties, including other government agencies, to ensure payment accuracy.
- giving false or misleading information is a serious offence.

Your signature



Date

/ /

Before returning this form, check that all questions are answered and the authorised officer has signed, dated and placed their institution's official stamp on this form at **PART B** – question 7.

Returning this form

Return this form and any supporting documents:

- online** using your Centrelink online account. For more information, go to servicesaustralia.gov.au/centrelinkuploaddocs
- in person at one of our service centres, if you are unable to use your Centrelink online account.

Office use only

Determined

Logon ID

/ /

Verification approved

Verification **not** approved

PART B – to be completed by authorised officer

6 You need to read this

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7 I declare that the student whose details appear at Question 2 of this form is enrolled at the institution and attending the campus/es shown at Question 3.

7a – Campus 1

Name of authorised officer

Phone number

Signature of authorised officer



Date

/ /

Campus/institution official stamp

7b – Campus 2 (if applicable)

Name of authorised officer

Phone number

Signature of authorised officer



Date

/ /

Campus/institution official stamp