

## **USI Application Form**

USI Application/Verification Form												
If you are completing this form electronically, press Tab on your keyboard to go to the next cell. The cell will automatically expand to accommodate your text. If you are writing, please write clearly. If you require help with this form please call 1300 130 666 for assistance.												
Date:												
Name (Use your Legal Name – it must match the ID you have used or will use to create your USI)												
Title:		Mr □	Mrs □	Miss [	] N	Is □	Inde	eterminate				
Last Name:								Given name:				
Date of Birth: Gender:												
DAY MONT	DAY MONTH YEAR   Male □ Female □ Indetermina							eterminate 🗆				
What is the address of your usual residence? (NOTE: Physical address where you usually reside not post office box)												
Street address:												
Suburb:					State:				Postcode:			
What is you	ır postal a	address	? (If diffe	erent fro	m res	sidenti	al ac	ddress above)				
What is your postal address? (If different from residential address above)  Street address:												
Suburb:				. ;	State	<b>:</b>			Po	ostcode	e:	
Contact det	ails:											
Phone contact:								Email contact:				
Unique Stu	dent Iden	tifier (U	SI):									
IMPORTANT: To receive your Qualification or Statement of Attainment on successful completion of your course, you will need to hold a valid USI. Select and complete one (1) of the following options.												
Option 1 – A	Already h	ave a U	SI – Pre	ferred o	ptior	n						
	I already have a USI and I give permission to verify my USI.			Lennox College			My USI # is:					
2 11 2 (2						0	r					
Option 2 (C	reating ov	wn USI)										
								count and providuse completion.	de my US	I to Len	inox (	College along
IMPORTAN	T: To cre	ate you	r own US	l visit: <u>h</u>	ttp://v	<u>www.u</u>	si.gc	ov.au/Pages/defa	ault.aspx			
						0						
Option 3 (Lennox to Create USI – available only in the event you are unable to create your own USI)												
I am unable to create my own USI and I give permission to Lennox College to create a USI Account on my behalf. I have provided Lennox College with the document number of the following form of Personal Identification (ID) detailed below.												
	Drivers Licence (Australian)				Ov			verseas Passport (Current)				
Document Identification Number:												
Country of Birth						То	wn / City of Birth	1				
IMPORTANT: For this service there will be a processing period of 5-10 business days.												

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Applicant Declaration This section must be completed. If left blank, Lennox College Application / Verification will not be processed.											
☐ I have read, understood and agree to Lennox College's Unique Student Identifier Privacy Notice.											
Name:	Signature:										
Date:											
Lennox College Office Use Only											
App Received:	□ Yes	Date			USI Verified		Yes	Date			
Verification Confirmation email sent to learner:	□ Yes	Date			USI Not Verified		Yes	Date			
Lennox College Staff Member:						Da	te				
Admin Comments:											
For all USI Applications / Verification / Enquiries											
Post to: 487 King Street, West Melbourne VIC 3003 Phone: 1300 130 666					Email: info@lennoxcollege.edu.au						

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