

Personal Information Access Authorisation Form

Details			
Date:			
Name:			
Student ID:		Group Number:	
Course:			
Section 1			
Reason:			
Section 3			
Acknowledgement			
I understand that my application for access to my personal file is controlled by The Australian Institute of Commerce and Technology's Privacy Policy			
Print Name:		Signature:	
Authorisation			
Authorisation for Processing			
Action to be taken:	APPROVED		DENIED
Access Date:			
Comments:			
Signed:		Position:	
Print Name:		Date Processed:	