International Horse College (Ausintec Academy Pty Ltd)

Third Party Release of Information Form

Purpose:
This form authorises International Horse College (IHC) to release personal and/or academic information to a nominated third party. Information will only be released as specified below and in accordance with the Privacy Act 1988 (Cth) and IHC's Privacy Policy.

Student Details

- **Full Name:** _____
- **Student ID (if applicable):** _____
- **Date of Birth:** _____
- **Phone:** _____
- **Email:** _____

Third Party Details

- **Organisation / Individual Name:** _____
- **Relationship to Student (e.g., Employer, Parent, School):** _____
- **Contact Person (if organisation):** _____
- **Phone:** _____
- **Email:** _____

Information to be Released

☐ Enrolment Details
☐ Progress / Attendance Reports
☐ Training Results / Outcomes
☐ Copies of Certificates / Statements of Attainment
☐ Other (please specify): _____

Purpose of Release

☐ Employer reporting requirements
☐ School-based VET coordination
☐ Workforce Australia Provider reporting
☐ Other (please specify): _____

Authorisation

I, the undersigned, authorise International Horse College to release the information specified above to the nominated third party. This consent remains valid until (tick one):

☐ The completion of my course
☐ [Insert date] _____

I understand that: - I can withdraw this consent at any time by providing written notice to International Horse College; - Only the information authorised on this form will be released; - International Horse College will protect my information in accordance with its Privacy Policy.

Signatures

Student Signature: _____ **Date:** _____

Parent/Guardian Signature (if student under 18): _____ **Date:** _____

Authorising IHC Staff Member: _____ **Date:** _____

Contact:
International Horse College
Phone: 07 3102 5498
Email: admin@internationalhorsecollege.com