



AVENUES COLLEGE

UPDATE OF STUDENT PERSONAL INFORMATION

Student's Name: _____

Address: _____

_____ Post Code: _____ Independent Student: Yes/No

PARENT/GUARDIAN 1

Name: _____ Relationship to Student: _____

Contact Details: H: _____ M: _____ W: _____

Email: _____

EMERGENCY CONTACTS OTHER THAN LISTED ABOVE

1. _____
Name Relationship

Contact Details :

Home: _____ M: _____ W: _____

2. _____
Name Relationship

Contact Details :

Home: _____ M: _____ W: _____

Notes:

Parent/Guardian signature: _____ Date: _____

Office Use Only

EDSAS update completed by _____ Date: _____