



UNIVERSITY OF SOUTHERN QUEENSLAND

Request to Access Student File

Please complete and forward form to: e-mail: [Corporate Records](mailto:CorporateRecords@usq.edu.au)

STUDENT ID NUMBER

<input type="checkbox"/>	Photo ID sighted								

SURNAME	GIVEN NAMES	DATE OF BIRTH
		/ /

SIGNATURE OF STUDENT	DATE
	/ /

DETAILS OF REQUEST <i>(Please tick required Boxes)</i>	Timeframe
<input type="checkbox"/> Official Student File	1 Day
<input type="checkbox"/> Student Placement (Faculty) File	14 Days (min)
<input type="checkbox"/> List specific documents (e.g. Statement of Academic Record)	TBA
<input type="checkbox"/> Require photocopy of documents	
<input type="checkbox"/> Collect documents in person	
<input type="checkbox"/> Send documents (please provide details below)	
<input type="checkbox"/> Documents to be signed by Justice of the Peace (JP) <i>(Only a certified copy of an original document can be signed by a JP)</i>	

Mailing Address	E-mail Address

Viewing of a student file MUST BE carried out under supervision

Actioned by: **Date:** / /

Comments

USQ collects personal information to assist USQ in providing tertiary education and related ancillary services and to be able to contact you regard enrolment. Assessment and associated USQ services. USQ may transfer your personal information outside of Australia. Your personal information will not be disclosed to any other third party without your consent unless required or authorised to do so by law. By completing and submitting this form you are consenting to USQ using and disclosing your personal information as set out herein. Your rights to access and amend your personal information are set out in the [Information Privacy Act 2009 \(Qld\)](#).