

Student Name	
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I am over 18 years of age and have read and understand all of the above information, furthermore, I also agree that this form was filled out by me by my own free will, without any intervention by any third parties.

Signature

Date

Witness Name

Witness Signature

Date

Please return signed form to Pioneer College. This can be done in person or by email to: <u>Studentservices@pioneercollege.com.au</u>

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Version No.	Issue date	Nature of Amendment
1.3	12 Aug 2020	Finalized written document.
1.4	08 Feb 2022	Changed Header and Footer, Added RTO &
		CRICOS Code in footer, Adjusted Margin,
		Changed Font, Font Size, Font Colour,
		Alignment.
2.0	23 May 2022	Changed RTO provider name to Pioneer
		College, Change Logo, header and footer,
		changed email address

Record of Updates and Changes:

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