Student Administration

External Student ID Card Application form

Student Central
Locked Bag 1797, Penrith NSW 2751

University of Western Sydney
Bringing knowledge to life

This form is only to be used by students who are offshore or studying by distance mode or in other exceptional circumstances where directed to use this form and who have NOT previously been issued with a UWS student ID card. If you attend classes on a UWS campus, you should visit your Student Central to apply for your card.
You must supply a photograph which has been signed on the back by a witness qualified in one of the categories listed in Section 2. The photograph must be: passport size (35 mm x 45 mm), in colour, a full front view of your head and shoulders, recent (within the last 12 months), clear (not obscured or dark), and must have your student ID number written on the back.
Place the photograph (which has your student ID number and witness' signature on the back) in an envelope, write your name and student number on the sealed envelope and attach the envelope to this form. Post the form and photograph to the address above.
Please complete this form in **BLACK INK** using **CAPITAL LETTERS**.

1 - PERSONAL DETAILS

Student ID number

Daytime contact phone number +

Title

Family name

Given name(s)

Course code

Course name

Mode (external or offshore)

2 - PROOF OF IDENTITY - WITNESS DETAILS

Title

Family name

Given name(s)

Postal address

Unit no.		Street no.		Street name			
Suburb					State	Postcode	
Country							

I declare that the photograph I have signed is a true photograph of the person whose name and signature appears on this form. I am qualified as a witness in the category indicated by the ticked box to the right. I have supplied my official stamp or registration number below.

- ☐ Accountant—Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accounts, the National Institute of Accountants, the Association of Taxation and Management Accountants or a Registered Tax Agent
- ☐ Bank or Credit Union Branch Manager (but not the Manager of a bank travel centre)
- ☐ Registered Medical Practitioner
- ☐ Police Officer in charge of a police station, or of the rank of sergeant or above
- ☐ Principal of an Australian secondary college, high school or primary school
- ☐ Manager of a Post Office
- ☐ Solicitor, Barrister or Patent Attorney
- ☐ Justice of the Peace

✗ SIGN HERE

OFFICIAL SEAL OR REGISTRATION NUMBER

D D / M M / Y Y Y Y

3 - STUDENT DECLARATION

I declare that the information provided by me on this form is true and correct. I also agree to the release of personal information about me for the purpose of assessing this application.
Student's signature

✗ SIGN HERE

Date D D / M M / Y Y Y Y +

Date Received

In providing my personal information to the University, I understand that, other than as authorised by law, the University will only use this information for the purposes for which it is being collected in accordance with the University's functions and activities associated with my enrolment. In some instances, the University may need to disclose information to any Government department which administers or has authority regarding education or immigration policy and law and any other Government agencies (State, Territory or Federal, an affiliated entity of the University, or to third parties for the purposes of recovering unpaid University fees or other debts owed to the University, and I consent to such disclosure. I also understand that all information will be collected, stored, accessed and disseminated or destroyed in accordance with privacy, records management and other relevant laws, and the University's policies.

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