



Unique Student Identifier Application

Personal Detail	
First Name	
Family Name	
Date of Birth	
Gender	
Address	
Phone	
Mobile	
Email	
Evidence of Identity (please provide detail for one of the five options below)	
Drivers Licence	Licence Number
Medicare Card	Medicare number Name of card
Australian Passport	Passport number
Non-Australian Passport	Passport number Country code
Birth Certificate	Certificate number State Date of registration Date printed
Citizenship Certificate	Stock number Date

Application Declaration

I authorise Blended Learning International (RTO 110068) to apply a unique Student identifier code on my behalf.

I acknowledge that without a USI code I will not be offer a place to any AQF program from 1 January 2015.

I have provided a copy of the evidence of identity with this application.

Print Name	
Signature	
Date	

Post: PO box 374 Dickson ACT 2602
Email: info@blendedlearning.edu.au