Access and Inclusion Registration Form



CONFIDENTIAL Student to complete and return to Access and Inclusion

Your confidentiality is protected under Charles Darwin University's Privacy and Confidentiality Policy.

Student Name:		Student Number (if applicable):
Current or prospective student?	Current ☐ Prospective ☐	Date of Birth:
Name of Course:		Course Code:
Phone Number:		Territory/State:
Are you an International student?		Yes □ No □
Do you identify as an Aboriginal and/or Torres Strait Islander person?		Aboriginal □ Torres Strait Islander □ Both □ No □ Would prefer not to say □
What is your mode of study?		Face to Face ☐ Online ☐ Mixed ☐

1. What is the circumstance (disability, medical or mental health condition, carer responsibilities, domestic or family violence, emergency volunteer, Defence Reservist, or cultural or religious observance) affecting your study? How does this impact your study?

2. Did you receive adjustments during prior educat equipment)?	ion (including assistive technology or			
Yes □	No □			
Please provide details:				
Consent				
I authorise Access and Inclusion to:				
1. Use this information to develop and implement adjustments with relevant				
Charles Darwin University staff. 2. Seek further information from the professional who completed my support				
form and/or other provided documentation.				
3. Provide this form to the professional as evidence of my consent for Access				
and Inclusion to seek further information	•			
Signature: Date:				
If you have any concerns regarding consent and privacy	please contact Access and Inclusion.			
Contact				
Contact				
Email: inclusion@cdu.edu.au	Casuarina Campus			
Telephone: (08) 8946 6288	Equity Services – Blue 1.1.21 Ellengowan Drive, Darwin NT			
Website: www.cdu.edu.au/equity-services/disability-services	LIICH gowall Dilve, Dalwiil NI			
Post: Access and Inclusion	Alice Springs Campus			
Student Engagement	Information Centre – Building 1.1.1			
Charles Darwin University, Darwin NT 0909	Grevillea Drive, Alice Springs NT			

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