



MELBOURNE
INSTITUTE OF TECHNOLOGY

Authorisation for a Person to Act as a Proxy

Student ID: _____

I, (student's name) _____, born on

(date of birth) _____, currently residing at

(student's address) _____

authorise (proxy's full name) _____,

born on (date of birth) _____, whose signature

appears below, to act as my proxy for the following at MIT:

- Re-enrolment
- Collection of my completion letter and/or transcript
- Collection of my testamur

I accept full responsibility for the actions of my proxy and any risk associated with having a proxy act on my behalf.

Student's signature: _____ Date: ____/____/____

Proxy's signature: _____ Date: ____/____/____

Please note: Your proxy is required to bring photo identification (e.g. driver's licence, passport) upon presentation.