

Non-State Schools Accreditation Board

Name change notification

Privacy information

This form collects information to enable the Non-State Schools Accreditation Board to update the register kept under section 126 of the *Education (Accreditation of Non-State Schools) Act 2017* (the "Accreditation Act").

Certain data collected in this form is 'personal information' within the meaning of the Queensland Government *Information Privacy Act 2009*, which deals with the collection and handling of such information by government agencies. This form collects personal information about an authorised contact person for the purpose of processing this change notification.

The information collected in this form may be disclosed to the following entities:

- the Queensland Minister for Education;
- the Director-General of Education;
- the Office of Non-State Education and other relevant areas of the Queensland Department of Education;
- authorised persons appointed under the Accreditation Act; and
- relevant stakeholders to the Non-State Schools Accreditation Board.

In the event that the person submitting the form is providing personal information on behalf of someone else, it is the responsibility of the governing body or school to ensure that the person has the correct information and authority to submit the information.

Certain information collected in this form may also be published on the Board's website (www.nssab.qld.edu.au) under Open data (data.qld.gov.au) if suitable for release. In other instances, the information collected in this form can be disclosed without further consent where authorised or required by law.

Name change details

Notification to change the name of a

☐ School ☐ Governing body from this date _____

CURRENT NAME _____

Location (if for a school) _____

NEW NAME _____

Declaration

Authorised person and declaration	<i>The person authorised by the governing body to act for, and on its behalf, for example the chairperson or secretary, is to complete the declaration and provide the contact details requested below. For non-State school user access only, this may also be the principal or the person authorized to act on behalf of the school, e.g. a personal assistant or school administrator.</i>
Declaration	☐ I declare that the information provided in this form is, to the best of my knowledge, true and correct.
Full name	_____
Position in relation to governing body or school	_____
Telephone number	_____
Email address	_____
Date	_____

Print Form

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