



PARTICIPANT TRANSFER FORM

☐ Have completed previous level(s)

For a Participant transferring from one Duke of Ed Award Centre to another in NSW. Form to be completed by the Award Leader of the transferring in Award Centre and returned to dukeofed@sport.nsw.gov.au

Participant Information Date of birth **Name** ΡN **Email ORB ID Transferring from Award Centre Name** ■ NSW □ Interstate □ International Location **Transferring to Award Centre Name Award Leader Name ORB ID** ΑL Signature* Date *By signing this Participant Transfer Form, you are consenting to this Participant transfer and understand your obligations to verify the Working With Children Check (WWCC) with the Office of Children's Guardian for all Assessors and Supervisors nominated by the Participant if they are not already on your approved Assessor registry. **Privacy Statement** The Office of Sport will only collect and store the information that you voluntarily provide. Any information provided by you will be handled in accordance with our privacy policy, available at https://sport.nsw.gov.au/privacy. If you do not wish to provide the information requested, then we may not be able to allow you to participate in the Duke of Edinburgh program or handle your enquiries. Any information provided by you to the Office of Sport can be accessed by you during standard office hours and updated by writing to us or by contacting us on 13 13 02. Office Use Only □ ORB record exists □ Participant's registration is approved and paid

D22/48232 Page **1** of **1**