



## Airport Pickup Request Form

Family Name: ..... Given Name: .....

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address (Home country):  
.....  
.....

Tel: (.....)..... Fax: (.....).....

Email: .....

Agent: .....

Agent Contact: Mr / Ms.....

Tel: (.....)..... Fax: (.....).....

Email: .....

### Flight Details

Melbourne Arrival Date: ..... Airline: ..... Flight No: .....

Time: ..... AM / PM (Please attach a copy of your ticket)

Any special needs? (e.g., wheelchair, large amounts of luggage)  
(When you book your flight, send us this information immediately)

*If you plan to travel with other member of your family, you must advise the Student Support officer. After completing this form, please send it to [apply@iitraining.vic.edu.au](mailto:apply@iitraining.vic.edu.au)*

*This form must be received no later than 72 hours via email prior to your arrival and during office hours. (Monday – Sunday 9.00 AM – 5.00 PM AEST)*

*If there are any queries, call us on 1300 651 348*

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_