

EA ID

Applicant's DetailsFamily name/surname

Migrant Skills Assessment

Ending appointment form for Migration Agent / Legal Practitioner / Exempt Person

Please either type in the fields provided or print this form and complete it using a pen and BLOCK letters.

Given Names

Date of Birth (dd/mm/yyyy)

Email address			
Ending appointment v	vith Migration Agent / Legal Practitio	oner / Exempt Pers	on
	agent / legal practitioner / exempt perso Australia. I understand that I will be act	•	hereby revoke the authorisation of alf in matters relating to my migration skills assessment alf from this point onwards.
Name			
EA ID			
Organisation Name (if ap	plicable)		
For Migration Agent - M	ligration Agent Registration Number		
For Legal Practitioner - I	Legal Practitioner Number		
For Exempt Person - De	escribe relationship to you e.g. Mother, U	Jncle, Friend etc	
Applicant Signature *		Dat	te * (dd/mm/yyyy)
Migration Agent / Legal Practitioner / Exempt Person Signature *		Dat	te * (dd/mm/yyyy)
			ease do not use cut and paste signatures. 3 or email msaadmin@engineersaustralia.org.au
Declaration by Applica	ant		
declare that the auth	id returning this form to Engineers Australia horisation of the migration agent / legal pra tion to my Migration Skills Assessment is he	actitioner / exempt pe	erson specified in this form to deal with Engineers Australia
• agree and understand that all correspondence from Engineers Australia relating to my migration skills assessment application will be sent to my email address as notified by me to Engineers Australia;			
agree and understand that I will be dealing directly with Engineers Australia in respect of my Engineers Australia migration skills assessment;			
	nation as may have been provided by my fo		I information provided by me with respect to my application actitioner / exempt person) for the purpose of my migration
	have read and understood that Engineers Albed in Engineers Australia's <u>Privacy Policy</u> .	australia or its third-pa	arty providers may collect my personal information and for
Applicant Signature *		Dat	te * (dd/mm/yyyy)
NOTE: Only original har	ndwritten, electronic and digital signature	es are acceptable. Pl	ease do not use cut and paste signatures.