

Client Number (Teacher/Enroller Number)



**Australian**  
**Music**  
**Examinations**  
**Board (Vic) Ltd**

# 'AMEB CONNECT' (VICTORIA) ACCESS AUTHORISATION FORM (FOR REGISTERED SCHOOLS)

Special *AMEB Connect* access arrangements apply to Registered Schools. Each school (or campus) needs to appoint a representative to be given access rights to *AMEB Connect*. To be granted access and to enable the 'Pay later' function this Access Authorisation Form must be signed by member of the school's management team (e.g. the Director of Music). Once the information on this form has been verified, AMEB Victoria will contact the school's authorised representative to advise that the school account has been established and that the 'Pay later' function has been activated.

Note that schools are set up with blank fields for **Title**, **Sex**, **Date of Birth**; and are identified by a period (full stop) in the **First Name** field and the name of the school (or campus) in the **Family Name** field. The authorised user must NOT change any of the abovementioned fields.

The authorised user may change any of the following fields, as required: any of the **Phone Number** fields, **Fax Number**, **Email Address**, **Actual (Street) Address**, **Mail Address**. To change a school's authorised user, this form will need to be updated with the new user's name and contact details and re-submitted.

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## AUTHORISED USER DETAILS (This person will be established as the primary contact for the particular school/campus.)

NAME OF SCHOOL (CAMPUS): .....

NAME OF AUTHORISED USER: .....

PHONE (BUSINESS): ..... PHONE (MOBILE OR HOME): .....

FAX: ..... EMAIL ADDRESS\*: .....

\*This email address will be used to log in to AMEB Connect, together with a password.

## AUTHORISATION

I, ..... (name of authorising person),

as ..... (position held)

of ..... (name of school/campus)

hereby appoint ..... (name of authorised user)

as the primary AMEB Victoria contact for the School and with the authority of the School to access *AMEB Connect (Victoria)* to enrol candidates for examination, purchase publications and amend the School's contact details if required.

## REQUEST FOR A CREDIT ACCOUNT

On behalf of the School I request a 'Pay later' credit facility on the understanding that payments to AMEB Victoria will be due within 14 days of a Tax Invoice being issued by email and if moneys owed to AMEB Victoria are not paid by the due date services might be suspended and the 'Pay later' facility might be withdrawn.

Signed: ..... Date: .....

Please post this form to:

**Australian Music Examinations Board (Vic) Ltd** ABN 59 050 464 634  
259 Auburn Road, Hawthorn, VIC 3122 Tel: (03) 9035 8888 Email: [ameb-vic@unimelb.edu.au](mailto:ameb-vic@unimelb.edu.au)