

REQUEST FORM

- Please fill it in using CAPITAL/BLOCK LETTERS and tick (✓) relevant option.

Date (DD/MM/YYYY): / /	Email Address:
Student No.:	Mobile Phone No:
Given Name:	Address:
Family Name:	USI No.:
Date of Birth : / /	
Course Code & Name:	
I would like to apply for:	
<input type="checkbox"/> Qualification Certificate <input type="checkbox"/> Record of Results <input type="checkbox"/> Statement of Attainment <input type="checkbox"/> Course Completion Letter <input type="checkbox"/> Fee Summary Report <input type="checkbox"/> Certificate of Attendance – (with only be provided for graduating General English students) <input type="checkbox"/> Health Cover Request <input type="checkbox"/> Student Card AUD \$20.00 fee (Re-issue) <input type="checkbox"/> Current CoE <input type="checkbox"/> Extension of COE International Students . Reason:New COE End Date: / / <input type="checkbox"/> Extension of Course Domestic Students . Reason: New Course End Date: / / <input type="checkbox"/> Confirmation of Studies Letter <input type="checkbox"/> Graduation Certificate - AUD \$50.00 fee(re-issue) Please attach receipt <input type="checkbox"/> Transcript / Report-AUD \$25.00 fee (Re-issue) <input type="checkbox"/> Other (Please Specify)	
Student Signature:	

FOR OFFICE USE ONLY			
The request is for issuance of Qualification Certificate & Record of Result, Statement of Attainment/ Course Completion Letter: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, the following will need to be completed before making a decision.			
Completion confirmed by Academic staff?	Y / N	Initials: _____	Date: _____
All tuition fees paid?	Y / N	Initials: _____	Date: _____

Request Approved:		<input type="checkbox"/> Yes <input type="checkbox"/> No	Date: / /	
Approved By:	Name:	PRISMS Updated (If applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
		Wisenet Updated (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
		Notification to student attached (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Signature:	Award documentation prepared? (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
		Certificate Number: _____		
		Date of Issue: _____		
Comments:				