

Student Request Form

**Please note that all requests will be processed in 14 working days.*

| Personal Details: | | |
|-------------------|---|--------------------|
| Family Name: | | Date of Birth: / / |
| Given Name: | Gender: Male <input type="checkbox"/> Female: <input type="checkbox"/> Intermediate: <input type="checkbox"/> | |
| Address: | | Postcode: |
| Student ID: | Group: | Mobile: |
| Email: | | |
| Course Name: | | |
| USI Number: | | |

| Request Details: | | | | | | | | | | | | |
|--|--|--|-----------------------------------|---|--|---|---|--|--|--|-------|--|
| <p>I would like to request:</p> <table border="0"> <tr> <td><input type="checkbox"/> Statement of Attainment</td> <td><input type="checkbox"/> Enrolment Verification Letter</td> </tr> <tr> <td><input type="checkbox"/> Testamur</td> <td><input type="checkbox"/> Course Completion Letter</td> </tr> <tr> <td><input type="checkbox"/> Record of Results</td> <td><input type="checkbox"/> Confirmation of Study Letter</td> </tr> <tr> <td><input type="checkbox"/> Confirmation of Non-Teaching Period Letter</td> <td><input type="checkbox"/> Visitor Invitation Letter</td> </tr> <tr> <td><input type="checkbox"/> Other (please specify):</td> <td></td> </tr> <tr> <td colspan="2">_____</td> </tr> </table> <p>Student Signature: _____ Date: / /</p> | <input type="checkbox"/> Statement of Attainment | <input type="checkbox"/> Enrolment Verification Letter | <input type="checkbox"/> Testamur | <input type="checkbox"/> Course Completion Letter | <input type="checkbox"/> Record of Results | <input type="checkbox"/> Confirmation of Study Letter | <input type="checkbox"/> Confirmation of Non-Teaching Period Letter | <input type="checkbox"/> Visitor Invitation Letter | <input type="checkbox"/> Other (please specify): | | _____ | |
| <input type="checkbox"/> Statement of Attainment | <input type="checkbox"/> Enrolment Verification Letter | | | | | | | | | | | |
| <input type="checkbox"/> Testamur | <input type="checkbox"/> Course Completion Letter | | | | | | | | | | | |
| <input type="checkbox"/> Record of Results | <input type="checkbox"/> Confirmation of Study Letter | | | | | | | | | | | |
| <input type="checkbox"/> Confirmation of Non-Teaching Period Letter | <input type="checkbox"/> Visitor Invitation Letter | | | | | | | | | | | |
| <input type="checkbox"/> Other (please specify): | | | | | | | | | | | | |
| _____ | | | | | | | | | | | | |

| OFFICE USE ONLY | | | | |
|--|--------------|-------|------------|--|
| <table border="1"> <tr> <td>Received by:</td> <td>Date:</td> </tr> <tr> <td colspan="2">Signature:</td> </tr> </table> | Received by: | Date: | Signature: | |
| Received by: | Date: | | | |
| Signature: | | | | |
| OFFICE CHECKLIST | | | | |
| <input type="checkbox"/> The student has paid the course fee in full <input type="checkbox"/> Student has completed all units of competency | | | | |