



RTO CODE: 21588

Student Request Form

Personal Details:

* Please note that all requests will be processed in 30 days.

Family Name:		Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Given Name:		Date of Birth:	
Student ID No:	Group:	Mobile:	
Email:			
I would like to request:			
<input type="checkbox"/> Record of results	<input type="checkbox"/> Others (please specify)		
<input type="checkbox"/> Testamur	<input type="checkbox"/> Change to class times		
<input type="checkbox"/> Statement of Attainment	<input type="checkbox"/> Confirmation of enrolment		
Course:			
Student Signature: _____		Date: _____	
Office Use Only			
Received By: _____		Date: _____	
Staff signature: _____			
Department Check List			
<input type="checkbox"/> Student has paid the full course fee.			
<input type="checkbox"/> Student has completed units of competency			
<input type="checkbox"/> Student Academic Checklist has been completed			
Receiving Details			
I hereby declare that I have received the requested documents.			
Student Signature: _____		Date: _____	
Issuing Staff Signature: _____		Date: _____	