

## Certificate Issue Request Form

*Please ensure to fill this form correctly. Incorrect or incomplete forms will result in delays or rejections.*

<b>Student ID:</b>	<b>Student Name:</b>
<b>Phone:</b>	<b>Email:</b>
<b>Qualification Code &amp; Name:</b>	
<b>Address:</b>	

### Please choose one of the following:

- I declare that I have completed all program requirements in my enrolled course, have paid all due tuition fees and would like the Institute to issue me with a Testamur and Statement of Results (SOR)
- I declare that I have completed partial program requirements in my enrolled course, have paid all due tuition fees and would like the Institute to issue me with a Statement of Attainment (SOA)

### I would like to pick up my Awards from the Institute

Student Signature: \_\_\_\_\_ Request Date: \_\_\_\_\_

RTO NO: 41204- CRICOS CODE: 03427D

**Collected by (Student Signature):** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Office use only

#### Step 1: Student Services Officer / Manager

We hereby certify that this student has met all program requirements to justify the issuance of this award. Academic records supporting these statements have been compiled in accordance with Australian Qualifications Framework requirements.

<b>Certificate Validation Checklist</b>	<b>Yes</b>	<b>No</b>
Sighted verified Unique Student Identifier (USI) in RTOM		
Check Academic Records		
Check re-assessment (date, grade) if any		
Check COE detail (issue and completion date)		

Certificate checked (date, name, qualification, grade, certificate number)		
Details are recorded in Register of issued AQF qualifications		

Student documents updated – PROCESS REQUEST

Student documents not updated – DO NOT PROCESS REQUEST

Student Services Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Step 2: Finance Department**

Circle appropriate:

NO FEES DUE – PROCESS REQUEST

FEES DUE – DO NOT PROCESS REQUEST Amount Due: \_\_\_\_\_

Account Officer Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Step 4. Academic Manager**

Academic Manager: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Comments:**

Certificate No: \_\_\_\_\_ Transcript No: \_\_\_\_\_ Date Certification Prepared: \_\_\_\_\_