a 02 9055 8558 ⇒ www.abbeycollege.edu.au a info@abbeycollege.edu.au ♥ Sydney Campus: L1 L2 L6, 770 George St, Sydney NSW 2000 Australia Adelaide Campus: L11, 118 King William, Adelaide SA 5000 Australia



## **DOCUMENT REQUEST FORM**

Please note that the requests can only be processed if payments are up to date.

Request for transcripts/qualifications will be available within 30 calendar days from completion date. Please note all the documents request will take up to 10 working days from submission of this form.

Optional: A charge of \$50.00 will be applied for URGENT processing or else stated. (3 working days from the request\*, Account Name: Abbey College Australia; BSB: 062 033, Account number: 1028 9591)

\* The request can only be processed with no pending payments and all assessments have been completely marked with competent results.

## CTUDENT DETAILS.

SIUDENI DEIAIL	5:								
First Name:				Family Name	e:				
Student ID:				Contact Number:					
Address:									
Email Address:									
Course Name:									
DOCUMENT REQUES	iT:								
O Certificate  Re-issue fee \$50.00  URGENT processing fee \$350		Re	<b>Transcript</b> Re-issue fee \$50.00 URGENT processing fee \$350			Completion Letter Re-issue fee \$50.00 Course completed ONLY			
O Statement of At	O In	) Interim Transcript			Confirmation / Reference Letter*			*	
O Attendance Cer	rtificate*	O st	udent Break Lett	er:	0	Other:			
Reason/s (Valid reaso	on and supporting	documer	nt/s are required)	*:					
STUDENT DECLARATION I declare that all the terms and conditions false or has been with	information I has and agree to a	abide by	those rules and	l any subsequ	uent amer	ndments.	If any info	rmation	is
Student Signature: _				Da	ate:/	//_			
I confirm that I have		-		D	ate: /	, ,			
Student Signature: _				D	ate /	′/			
OFFICE USE ONLY									
O Urgent Processing		O Fee	O Fee Paid		Amount (AUD): \$				
Charged By:			Signature:			Date:	1	/	
Processed By:			Signature:			Date:	1	/	