

Certificate & Document Request Authority Form

Section 1 – Client Details

I understand that when completing this document that Unity School of Education Pty Ltd has 7 days to complete this request.

Name:		Student number:	
Qualification Code & Title/ Course Name:		Date:	

Section 2 – Certificate Details

Certificate to be Issued:

Nationally Recognised Training:	NON-Nationally Recognised Training:
<input type="checkbox"/> Qualification: (including Transcript of Results)	<input type="checkbox"/> Letter of Completion:
<input type="checkbox"/> Statement of Attainment:	<input type="checkbox"/> Letter of Attendance:
<input type="checkbox"/> Letter of Approved Leave:	<input type="checkbox"/> Other please state:

Section 3 – Authorisation Academic Manager or Student Support Officer

I confirm the information is correct and certification can be issued:

DESCRIPTION	AUTHORISED SIGNATURES
<input type="checkbox"/> Qualification Issue form signed by student	
<input type="checkbox"/> Correct student name	
<input type="checkbox"/> Correct course start date and finish date	
<input type="checkbox"/> Correct course code and name	
<input type="checkbox"/> Correct unit names and number of units	
<input type="checkbox"/> Student file and assessment folder checked	
<input type="checkbox"/> Correct number of credit transfers approved	
<input type="checkbox"/> Compiled results	
<input type="checkbox"/> Signed by DOS	
<input type="checkbox"/> Outstanding debts cleared	
<input type="checkbox"/> Signed qualification log-book and register	
<input type="checkbox"/> Student exit interview completed	

Record Officer's Signature: _____

Issue date:
 ____ / ____ / ____
 Format: DD/MM/YYYY

Student Signature: _____

Issue date:
 ____ / ____ / ____
 Format: DD/MM/YYYY