



Magill College Pty Ltd Trading as Magill College Sydney

ABN: 67 090 050 990

CRICOS Provider Code: 01994M RTO No: 91367

Tel: (+61 2) 8061 6980 Fax: (+61 2) 9267 1711 www.magill.edu.au

DOCUMENT REQUEST FORM

1. Please complete your personal details, read the notes, sign the form and return it to the Administration Office.
2. Please see Administration Staff if you have any questions or need advice on what document(s) you may require.
3. Please allow up to **10 WORKING DAYS** from the completion date of your course to issue a qualification or Statement of Attainment.
4. A charge of **\$50** will be applied for **URGENT** processing.

Student No:			
Family Name:		Given Name:	
Tel/Mobile:		Email:	
Address: (within Australia)			
Course (Please tick <input checked="" type="checkbox"/>):	<input type="checkbox"/> Certificate III in Business	<input type="checkbox"/> Certificate IV in Business	
	<input type="checkbox"/> Diploma of Business	<input type="checkbox"/> Advanced Diploma of Business	<input type="checkbox"/> OTHER
Document(s) Requested (Please tick <input checked="" type="checkbox"/>):	Please provide us with:		
Qualification <input type="checkbox"/> Certificate III in Business <input type="checkbox"/> Certificate IV in Business <input type="checkbox"/> Diploma of Business <input type="checkbox"/> Advanced Diploma of Business	N/A		
Letters <input type="checkbox"/> Confirmation of Enrolment <input type="checkbox"/> Completion Letter	N/A		
Transcripts <input type="checkbox"/> Statement of Attainment <input type="checkbox"/> Interim Transcript (current students only)	N/A		
Transfer to other institute <input type="checkbox"/> Release Letter	A copy of an offer letter from the University/College applied and a letter stating why you wish to be released from this College.		
<input type="checkbox"/> Early Termination -Your COE will be cancelled. Early Termination Date: ____ / ____ / ____	A letter stating why you wish to terminate your course and the course termination date. If you are going back to your country permanently, please provide us with travel itinerary and/or other supporting documents requested by the Administration Manager.		
<input type="checkbox"/> Refund Request (Please refer to our Student Refund and Cancellation Policy)	A letter stating why you wish to apply for refund and other supporting document requested by the Administration Manager.		
<input type="checkbox"/> Other (please specify in comment section below)	Copy of documentation evidence if applicable.		
Additional Comments:			
Student Signature:		Date:	

OFFICE USE ONLY

APPROVED

NOT APPROVED

IN PENDING

COMMENT:

SIGNATURE OF AUTHORISED PERSON:

DATE: