

UTF15 Student Record Access Request Form

Please complete this form and submit at the reception.

Student Full Name	
Student ID Number	
Course enrolled:	
Collection method:	<input type="checkbox"/> Collect from the institute <input type="checkbox"/> Post to my address: _____ _____ _____

I would like to have a copy of:

- | | | |
|--|--|--|
| <input type="checkbox"/> Training plan | <input type="checkbox"/> Qualification (1st issue) | <input type="checkbox"/> Other document: _____ |
| <input type="checkbox"/> Statement of attainment | <input type="checkbox"/> Qualification (re-issue) | _____ |
| | | _____ |

☐ I am aware of the costs associating with issuing the requested documents as per the Fees and Charges Schedule.

☐ I am ware that all outstanding fees must be paid before the requested document to be issued.

Student Signature: _____ Date: ____/____/____

For office use only:

Form received by: _____	Date: ____/____/____
Document prepared by: _____	Date: ____/____/____
Finance checked and approved by: _____	Date: ____/____/____
Data entered to SMS by: _____	Date: ____/____/____
Document delivered to student by: _____	Date: ____/____/____