



Nature Care College

Request for Testamurs, Certificates, Academic Record, Graduation Statement, Letters of Attendance

Name: _____ Student No: _____
Please PRINT student's name EXACTLY as they want it to appear on qualifications etc

Phone No/s: (W) _____ (H) _____ Mobile _____

Date Requested: _____ Requested by: _____ Date of Birth: (I.D. Purposes) _____

N.B. • Please allow approximately 2-3 weeks for your request.

- **Professional Training Program (i.e. Adv Diploma/Diploma/Certificate IV) requests must only be submitted if all components are completed including a the Apply First Aid Certificate**

Name & Type of Request:

Qualification (Advanced Diploma/Diploma/Cert IV)

Certificate Subject: _____

Record of Results/Graduation Statement : ATMS University

Letter of Attendance (Workshops Only): _____

Comments: _____

If requesting a Qualification (Advanced Diploma, Diploma, Cert IV) has student completed ALL course requirements, including the following:

Apply First Aid Certificate: Completed (date): _____ Copy in file? Yes No

Student Clinic: Completed (date): _____

Any Library Books / Fines Outstanding? Yes No Paid Professional Training Program Enrolment Fee? Yes No Not applicable

All course fees (including clinic fees) paid (date): _____ Checked by: _____

If answer is **NO** to any of above, please give details below:
(Please note: *Qualifications, Certificates, Academic Records or Letters of Attendance will not be issued if there are any fees outstanding.*)

Student will collect Testamur / Certificate etc from the College Yes No

Please mail Testamur / Certificate to student at the address below Yes

Mailing Address: _____
_____ Postcode: _____