## **Australian Health and Management Institute**

CRICOS Code: 03595K | RTO Provider ID: 70252



## **Document Request Form**

<ul> <li>No request will be pro</li> </ul>	ocessed until this form is fully complete	ed.	
<ul> <li>The request will be processed within 15 working days.</li> <li>If you are not sure on eligibility of request, please ask before making payment.</li> </ul>			
Section 1 : Personal Details			
Name		Student ID	
Address			·
Suburb		Post Code	
Email		Mobile	
Section 2: Document Request Details – I am applying for:			
Final Document (Certificate & Record of Results) [please also complete No Dues Form]			
Interim Transcript	\$180	Invitation Letter	\$100
Attendance Letter	\$180	Enrolment Letter	\$50
Term Break Letter	\$50	Leave Letter [Must attach	Application for Leave] \$50
Release Letter [Must attach Application for Withdrawal]  No Fees  Note: by selecting Release Letter – this request is not automatically guaranteed. You will be advised of the outcome within 15 working days.			
Any other Letter			
Section 3: Student Declaration			
I, (Applicant) hereby declare that the information contained in this application is true. I also understand that there may be associated fees which I agree to pay.			
Signature	·	Date	
Section 4: No Dues – TO BE COMPLETED BY AHMI ACCOUNTS TEAM ONLY			
DEPARTMENT	DUE – AMOUNT/DATE	NO DUE	SIGNATURE
ACCOUNTS			
Section 5 : Office Use Only			
Form Received By		Form Received Date	
Fees Amount Paid		Fees Received By & Date	
Comments:			
Staff Approval Signature		Approval Date	
Application Outcome: Ap	proved Declined	Student advised by: Email	Phone
Update PRISMS:	Yes No	Update SMS: Yes	No

**Australian Health and Management Institute** 

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