Australian Health and Management Institute

CRICOS Code: 0359K | RTO Provider ID: 70252



Document Request Form

Note.	and and contil this face of the	المعامدة ا			
 No request will be processed until this form is fully completed. No request will be processed if there is overdue fees. 					
 The request will be processed within 15 working days. 					
•	eligibility of request, please ask	before making pa	avment.		
Section 1 : Personal Details					
Name			Student ID		
Address					
Suburb			Post Code		
Email			Mobile		
Current Course				·	
Section 2: Document Request Details – I am applying for:					
Final Document (Certificate & Record of Results) [please also complete No Dues Form]					
Certificate & Record of Results will be available 28 days after course end date as per CoE No fees					
☐ Interim Transcript	☐ Invitation	\$	100		
Attendance Letter \$80		Enrolment Letter			\$80
Term Break Letter \$80		Leave Letter [Must attach Application for Leave] \$80		\$80	
Support Letter	\$100	\$100			
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. 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 5 : Office Use Only					
ACCOUNTS	TS DUE AMOUNT				
NO DUE		ACCOUNTS SIGNATURE			
Comments:					
Staff Approval Signature	_	Approval Date		<u></u>	
Application Outcome: App	Student advise	ed by: Email	Phone		
Update PRISMS: Yes No Update SMS: Yes No No					

Australian Health and Management Institute

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