

## Student Records Request Form

Family name .....

Given name .....

Course Name /Unit Name .....

Contact Details: Tel:..... Email: .....

### Please indicate the nature of your records request below

- View all records
- Transcript issue request
- Statement of Attainment request
- Certificate/qualification Issue request

Explanatory (why do you request this?)

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### Acknowledge Receipt of Records

Student Signature: \_\_\_\_\_ Date of Receiving: \_\_\_\_\_

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**OFFICE USE ONLY:**

Finance Department Approval:

Name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Academic Department Approval:

Name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Admissions Manager Approval and processed:

Name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: