

Request for Testamur and Statement of Attainment

Request for: ☐ Course Completion Letter ☐ Transcripts
☐ Course Completion Certificate ☐ Statement of Attainment

PERSONAL DETAILS

Student ID:

Given Name:

Family Name:

HOME ADDRESS

Street:

Suburb:

State:

Postcode:

CONTACTS

Phone No:

Mobile:

Email:

COURSE DETAILS

Course Name:

☐ I will collect the document(s) from Rhodes College

☐ Please mail me the document(s) to the above Home Address

Student Signature:

Date:

Processing time is 4 weeks. Documents will be available for collection on Fridays after 3 pm.

OFFICE USE ONLY

Date Received:

Received By:

Request Approved: ☐ Yes ☐ No

Date Processed:

PRISMS (eCOE) Updated: ☐ Yes ☐ No

Date Updated:

Correspondence sent to Student: ☐ Yes ☐ No

If Yes, Date Sent:

Documents Collected by Student: ☐ Yes ☐ No

If Yes, Student Initial :