



NSW Family Day Care Association Inc.

ABN: 97 377 365 755



DOCUMENT REQUEST FORM

SECTION A: STUDENT DETAILS	
Surname:	
Given Names:	
Date of Birth :	
Course Name:	
SECTION B: DOCUMENT REQUEST DETAILS	
I would like to request the following document/s:	
<input type="checkbox"/> Certificate	<input type="checkbox"/> Re-Issue (\$50.00)
<input type="checkbox"/> Statement of Attainment	<input type="checkbox"/> Re-Issue (\$50.00)
<input type="checkbox"/> Confirmation of Enrolment	<input type="checkbox"/> Re-Issue (\$50.00)
<input type="checkbox"/> Reference Letter	<input type="checkbox"/> Re-Issue (\$50.00)
<input type="checkbox"/> Others: please state:	<input type="checkbox"/> Re-Issue (\$50.00)

Important Note:	
<input type="checkbox"/> The first issuance of document is after course/unit period e.g. completed or withdrawn.	
<input type="checkbox"/> The processing of document request is 10 working days from receipt.	
<input type="checkbox"/> Request will not be processed unless payment has been made.	
Please mail to:	
Payment Method:	<input type="checkbox"/> Bank Transfer - BSB# 032 272 / Acc# 162 368 <input type="checkbox"/> Credit Card -
Amount: \$ _____	Card Number: _____ Expiry Date: _____
** Important Note: Please put your Full Name and Type of Payment on bank transfer description and send your transfer receipt to accounts@nswfdc.org.au	
Signature:	Date:
OFFICE USE ONLY:	
Accounts	
Checked by:	Payment Details:
Approved by:	<input type="checkbox"/> Fully Paid <input type="checkbox"/> Partial Payment
	<input type="checkbox"/> Balance _____
PEAK Training	
Comments:	
Processed by:	Date Processed:
Date Document Sent:	Date Document Received: