

STUDENT APPLICATION FOR REQUEST OF INFORMATION				
YOUR DETAILS				
Student Number:		Group No:		
Course Enrolled in:				
Given/First Name:		Family Name:		
Address (Where notification	on of outcome will be sent)			
		State:	Post Code	e:
Email:				
Contact Phone:		Mobile:		
COURSE CODE:	COURSE NAME:			
REASON FOR INFORMATION (You may choose to tick more than one reason)				
☐ Attendance Report	t			
□ Academic Progress Report				
□ Completion Letter				
□ Others (Specify)				
Same day issuing requ	nired □ Yes □ No			
Please note the following				
- It take approx. 4 working days to produce most documents				
 Your payments must be up-to-date in order for your request to be processed A processing charge of \$50 applies to student not currently enrolled at CAC 				
- A processing charge of \$5	0 applies for same day issuance			
Student Signature:			Date:	
OFFICE U	JSE ONLY: Please ensure thi	is form is sign	ed by all lis	ted departments
	:No - Outstanding fees			
1. Finance Dept.	:Yes - Outstanding fees of \$	must be clea	ared	
	:\$50 For same-day letter issuance		□ Paid	□ N/A
	: \$50 Processing Fee (for non-curent	students)	□ Paid	□ N/A (Current Student)
2. Admin. Dept.	: □ Issued and recorded on the Student Management System			