

Certificate Reprint Request

Personal Details

Identification required: When requesting a transcript or certificate reprint, you must present a legitimate form of personal identification (e.g. Driver's licence, passport) showing your name, photo and signature. If emailing or mailing your request, then a copy of this must be supplied with your request, otherwise your request cannot be processed.

Family Name:			Given Name:					
Date of Birth:			Daytime Phoi Number:	ne				
Previous Employer Name:			Current Emp Name:	loyer				
Address:								
Email Address:		Course Title:	Course Title:					
Payment Details								
Reprint of original c	ertificate / stateme	ent of attainment: QTY	\$55.	00 per c	opy (GST i	nc.)		
Retrieval of informa	ition from archives	: QTY	\$50.	00 plus	\$40 per ho	our or part	thereof (GST in	
Payment via Credit	Card only using (pl	ease tick):	☐ Master		American	Express		
Card Number:								
Name on Credit Car	rd:							
Expiry:		CCV:		Signature:				
Delivery Instructions Post to: (if different a								
Name:								
Address:					Pos	stcode:		
Privacy Statement								
Spectra Training Aus Statement can be pro		s and destroys personal inf st.	formation in acc	cordanc	e with our	Privacy Po	olicy. The Priva	
Signature:				Date:				
Our Contact Details			OFFICE US	- ONLV				
Lovol 7 420 Davides C	OFFICE USE ONLY Date:							
Level 7, 628 Bourke Street Melbourne 3000			Account Coding:					
ABN: 82 443 695 367			Completed by:					
Website:	www.spectra.e	du.au	Payment Date:					
Phone Number:	03 9292 8000	Issue Date:	Issue Date:					
Email:	info@spectra.ed	ID Confirma	ID Confirmation:					

Title: Certificate Reprint Request Document ID: AF006_S

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