

332-FM-MEGA Certificate Receipt Acknowledgement/Reissuance Request Form

| Student to complete prior to cons | <u> ection:</u> | | |
|---|----------------------------------|-----------------------------|-----------------------|
| Family name: | name: Given Names: | | |
| Address in Australia: | | | |
| Email: | ail: Mobile: | | |
| Would you like to receive MEGA ne | ewsletters/brochures? YES | NO NO | |
| Course Details: | | | |
| Certificate level: | | | |
| Certificate II Certificate III | Certificate IV Diploma | Advanced Diploma | English |
| Next study destination/school: | | | |
| Student signature: | 1 | Date: | |
| Student ID: | - | | |
| (To be s | signed and dated at the time of | collection) | |
| Collected By: | | Date: | |
| | (Office use only - Finance | ce) | |
| To be completed by student who re Certificate will be issued within 30 | • | - | cate only. Otherwise, |
| 1.Urgent Request <i>(\$50 fee per doc</i> u | ument – 48h issuance): To | otal Requested: | |
| 2.Reissuance of Award/Academic t | ranscript/Statement of Attainme | ent (\$50.00 per document): | |
| Total number of replacement docu | ments requested: | | |
| (Please allow 10 working days for | re-issuance requests to be proce | ssed.) | |
| Total amount paid: | Signature: | Date: | |
| | | | |
| | (Office use only) | | |
| Accounts approval: | Signature: | Date: | |
| AM Approval: | Signature: | Date: | |
| Issuing staff name: | Signature: | Date: | |
| COO/CD Final Verification: | Signature: | Date: | |
| CEO Approval: | Signature: | Date: | |

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Macquarie Education Group Australia Pty Ltd t/a MEGA Education

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