

## Access to Records Request Form

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Full name:	
Address:	
Contact Details:	
Student ID Number:	

I wish to request access to the following records:

How would you like to access these records?

- Copy posted to me  
 View the records in person

### Proof of Identity

We require you to provide proof of your identity as the student named above.

I am providing the following as evidence (choose 1):

- Passport  
 Birth certificate  
 Driver's license  
 Proof of Age Card

I have provided this as:

- Original shown to staff member  
 Certified copy of original

RTO (indicate): Sighted/Photographed Original/Copy received	
Staff Initial:	Date:

Signed:	
Print name:	
Date:	/ /

**Please return this form to our office**