

STUDENT RECORDS REQUEST FORM

Master Builders Association of Victoria

Purpose: This form is used to apply for a reissuance of the following; if the original have been lost or destroyed.

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| <ul style="list-style-type: none">• <i>Qualification Certificate (Testamur)</i>• <i>Statement of Attainment</i>• <i>copy of assessment submissions</i> | <ul style="list-style-type: none">• <i>Red card</i>• <i>Transcript of results</i> |
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Applying to have access to student records

Please read the following notes before submitting this form.

1. Privacy

Master Builders is committed to protecting and securing information collected through this application process. All handling of data will occur in accordance with the *Privacy Act 1988*. Therefore, all requests for student records must be signed by the student* and we require a copy of one of the following identification documents:

- Driver's licence; or
- Australian Passport; or
- Australian Birth Certificate; or

If you don't have any of the above, we will accept the following:

- Naturalisation Certificate (*Australian Citizenship*); and a
- Current Green Medicare Card

If you are unable to supply any of the above documentation, contact one of our training services team on (03) 9411 4555.

2. Lodgement of Application

You can submit the application by:

Visit us	Mail	Email
East Melbourne Office	GPO Box 544, Melbourne VIC 3001	training@mbav.com.au

Student Records Request Form

332 Albert Street, East Melbourne VIC 3002		
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3. *Other person applying to access the student records other than the student

Master Builders is unable to process requests for student records made by person(s) other than the student, unless written permission from the student has been granted through the Release of Information to a Third Party form which can be found on Master Builder's website <http://www.mbvtraining.com.au/forms/>. The person nominated is also required to provide a photo ID, as outlined above.

4. Processing Time

Please allow 7 to 10 business days for this application to be processed.

Student details				
Name:	<i>Given Name</i>	<i>Family Name</i>	<i>Previous family name (if applicable and supply a marriage certificate)</i>	
Date of birth:	<i>DD/MM/YYYY</i>			
Contact details:	<i>Home Number</i>	<i>Mobile Number</i>	<i>Email Address</i>	
Address details <i>Home Address:</i>	<i>Street No & Name</i>	<i>Suburb</i>	<i>State</i>	<i>Postcode</i>
<i>Postal Address: (if different from home address)</i>	<i>Street No & Name</i>	<i>Suburb</i>	<i>State</i>	<i>Postcode</i>
Employment details <i>Name:</i>	<i>Previous Place of Employment</i>		<i>Current Place of Employment</i>	
<i>Work Address:</i>	<i>Street No & Name</i>	<i>Suburb</i>	<i>State</i>	<i>Postcode</i>
Course Details				
Course/s Name:				
Year of Completion/s:				

IS YOUR BUILDER A MASTER BUILDER?



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*** If you require more space – please provide details in a separate sheet.*

Type of Document

Tick the type of document you are applying for	Cost (AUD)	Quantity	Total Cost
<input type="checkbox"/> Reissuance of Certificate (Testamur) for the following Qualification/s: <input type="checkbox"/> CPC50210 Diploma of Building and Construction (Building) <input type="checkbox"/> CPC50308 Diploma of Building and Construction (Management) <input type="checkbox"/> CPC40110 Certificate IV in Building and Construction (Building) <input type="checkbox"/> CPC40308 Certificate IV in Building and Construction (Estimating) <input type="checkbox"/> BSB41415 Certificate IV in Work Health and Safety /BSB41419 Certificate IV in Work Health and Safety <input type="checkbox"/> BSB30715 Certificate III in Work Health and Safety/ BSB30719 Certificate III in Work Health and Safety	\$50		
<input type="checkbox"/> Reissuance of Statement of Attainment <i>A list of all the units a student has enrolled in and received a result of Competent only.</i>	\$50		
<input type="checkbox"/> Transcript of Results <i>A list of all the units a student has enrolled in and received results of Competent or Not Yet Competent.</i>	\$50		
<input type="checkbox"/> Reissuance of a Red Card <i>**If you have completed the course after 30/6/2008, please contact Worksafe directly on 1800 136 089 – do not complete this form.</i> Red card no: _____ Date of Issue: _____	\$50		
<input type="checkbox"/> A copy of assessment submissions <i>A copy of assessment submitted to Master Builders for marking.</i>	*Price on Application		
<input type="checkbox"/> Other types of record	*Price on Application		

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Total Cost			
Declaration			
I declare that the information provided by me is, to the best of my knowledge, true and correct.			
Signature: <i>(If under 18 years of age Parent/Guardian Signature required)</i>	Signature	Date:	DD/MM/YYYY
Print Name:	Full Name		
Payment options			
<input type="checkbox"/> Cash (face to face only)			
<input type="checkbox"/> Cheque – Please find enclosed my cheque of \$ _____ (total amount) made payable to Master Builders.			
<input type="checkbox"/> Credit Card – I authorise to debit my credit card for \$ _____ (total amount) and details are as follows:			
Card type:	<input type="checkbox"/> MasterCard <input type="checkbox"/> Visa		
Card number:	_____		
Expiry Date:	___ / ___	CVC number:	
Name on card:			

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