

CERTIFICATE /TRANSCRIPT/STATEMENT OF ATTAINMENT COLLECTION FORM

I	(name) Student ID	
confirm that I have received /coll	ected my original Certificate / Tr	anscript /Statement of
attainment (Tick one or more), or	n (Date).	
Student Signature:		
Note: Please note that the charges for re-issuance of duplicate certificate/Transcript/Statement of Attainment is \$20.00 per page.		
OFFICE USE ONLY:		
Issued by	(staff name)	(Signature)
Date		

THE EARLY CHILDHOOD LEARNING COMPANY PTY. LTD. T/A ASTRAL SKILLS INSTITUTE OF AUSTRALIA

ABN: 80 600 951 264

RTO: 41322

CRICOS: 03858C





