



Access to Records Request Form

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

I wish to request access to the following records:

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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