Elite Education Institute Pty Ltd trading as Elite Education Institute

ABN 65 162 298 580 CRICOS Provider Code: 03390A

City Campus: Level 5, 770 George St Sydney NSW 2000

North Sydney Campus: Level 2, 1 James Place, North Sydney, NSW 2060

Website: www.ee.edu.au Email: admission@ee.edu.au



STUDENT DOCUMENTATION REQUEST FORM

Date:	Student Name:	
Student ID	Study course:	DOB:
Email Address:		
Contact Mobile Num	ber:	
Requested Docum	ent:	
□ Enrolment Certific	eate	□ Statement of Attainment
□ Statement of Aca	demic Progress	□ Study Break Certificate
Student's signature:		Date:
D. T. 40 T. 41 L. 61		
PLEASE ALLOV	V 5 WORKING DAYS	TO COMPLETE YOUR REQUEST.
OFFICE USE ONLY:		
Approved by:		
Date:		
Date document has be	en provided:	