

## tafeSA APPLICATION FOR PARCHMENT TAFESMS20

This form must be completed when you have successfully satisfied all requirements of an Award Course.

Please complete the Student section below then forward this form to the campus where you completed your studies.

STUDENT TO COMPLETE				
Student's Name	e:			
Please state your LEGAL name in full. This will appear on your Parchment.				
TAFE ID Number: SATAC No: (If Applicable):				
Date of Birth:		Contact Phone Number:		
Postal Address		ontact i none Number.		
Postal Address	·			
Suburb:		State:	Post Code:	
		State:	- Post Code	
Country: Award Title:				
Program Area	of Study:			
Have you completed this Award as part of a traineeship/apprenticeship:    Yes   No				
Have you completed this Award through Open Learning/External Study:  Yes				
What year did you complete this Award?				
If you <b>DO NOT</b> want your name to appear in the graduation programme, tick this box:				
How do you wish to receive your parchment? Please tick one of the options below:				
(1) Prese	nt my Parchment at the Graduation	Ceremony at	Campus	
(As not all campuses/programs hold formal graduations, please check with TAFE staff regarding your specific program.)				
☐ (2) Post i	(2) Post my Parchment to the above address. (You will need to provide a registered mail <b>B4</b>			
_		as Parchments will only be posted by registered mail.) (Go to 4)		
` '	ct my Parchment from		ampus (Go to 4)	
	require any other person to collect ssion for the person to collect.	your Parcnment, you must	t provide written and signed	
	btaining your Parchment prior to a aduation Ceremony.	Graduation Ceremony doe	s not exclude you from	
	ticked (2) or (3) above, do you wish		☐ Yes ☐ No	
(5) If <b>YE</b> 5	<b>3</b> , where would you like to graduate	?	Campus	
		Date:	/ /	
Student's Signature				
Administration Use Only				
Receiving Officer:		Date Received:		
	er:	Date Receive	ea:	