

## STUDENT RECORDS REQUEST FORM

If you have undertaken training through Master Plumbers Association of SA Inc (MPA) and require copies of your Qualifications, Statements of Attainment, Results, or any other Training information, you are required to complete and return the form below to:

**Post**

Master Plumbers Association of SA Inc  
PO Box 219, TORRENSVILLE PLAZA SA 5031

**Email:**

admin@mpasa.com.au  
**Fax:** 08 8292 4040

<b>Student Name:</b>			
<b>Address:</b>			
<b>Suburb:</b>		<b>Post Code:</b>	
<b>Home Phone:</b>		<b>Mobile:</b>	
<b>Email:</b>			
<b>Training Program:</b>			
<b>Year of Training:</b>			

**Information requested:**

- Student Results  
  Copy of Qualification or Statement of Attainment  
  Course Information  
 Other (please specify) \_\_\_\_\_

In order to provide the information requested above, we will require proof of Identification. This can either be sighted by a staff member, or a copy will need to be provided with your request form.  
*\*Please note that copies of Identification documents are securely destroyed following completion of service.*

The following forms of Identification are accepted:

- Driver's licence  
  Australian Passport  
  Birth Certificate  
  Medicare Card

**Confirmation**

- I confirm that the above information and any attached documents are true and correct.

Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

<b>Date Form Received:</b>		<b>Form Processed By:</b>	
<b>Valid Proof of ID Provided or Sighted:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Application for Information Approved:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Approved By:</b>		<b>Documents provided on:</b>	