

TERTIARY INSTITUTIONS SERVICE CENTRE

(Incorporated in Western Australia)

100 Royal Street, East Perth
Western Australia 6004

Telephone (08) 9318 8000
Facsimile (08) 9225 7050
<http://www.tisc.edu.au/>

APPLICATION FOR DUPLICATE RECORD OF RESULTS

CUSTOMER SERVICE STATEMENT

Our goal is to provide duplicate records of results within four (4) working days of receiving a completed application form. TISC takes every effort to protect confidentiality of examination results.

INCLUDE THE FOLLOWING WITH YOUR APPLICATION

1. Proof of Identity eg copy of driver's licence, proof of age card, passport or birth certificate. If you have no proof of identity, complete the Proof of Identity section over page.
2. Change of name documentation (if applicable) eg copy of marriage certificate, deed poll certificate.
3. Payment of \$33 (incl. GST) per certificate – see back of form for payment by credit card.

APPLICANT DETAILS

FAMILY NAME: _____

GIVEN NAMES: _____

FULL NAME AS IT
WILL APPEAR ON
ORIGINAL RECORD: _____

Please leave blank if same as above. If different, also provide proof of name change.

DATE OF BIRTH: _____ GENDER (M/F): _____

POSTAL ADDRESS: _____
_____ POSTCODE: _____

TELEPHONE: _____

EMAIL: _____

SIGNATURE: _____ DATE: _____

DOCUMENT(S) REQUIRED

DOCUMENT(S) REQUIRED	Tick item(s) required \$33.00 per copy	Year(s) of examination
TAE - Joint Admissions Advice Letter (1975 - 1985)		
TEE – Universities' Admission Advice Letter (1986 - 2008)		
WACE - Universities' Admission Advice Letter (2009 onwards)		
ATAA - Alternative Test for Adult Admission (1980 - 1991)		
STAT - Special Tertiary Admissions Test (1992 onwards)		
WAUFP – Western Australian Universities' Foundation Program Results Letter (1996 - 2010)		
WAUPP – Western Australian Universities' Preparatory Program Results Letter (2011 onwards)		

See page 2

DOCUMENT(S) COLLECTION/DELIVERY (tick one)

- Please post to the address I have provided on this form
- I will collect from TISC office on or after _____
 - Proof of identification will be required when collecting the document(s).
 - If another person is to collect the document(s) on your behalf, attach a letter of authorisation.

METHOD OF PAYMENT

Payment is only accepted in Australian dollars. Forms received without payment will be returned unprocessed.

- Cash (do not send cash by mail)
- Cheque/Money Order (payable to TISC)
- Credit Card (see below)

Please charge my Mastercard Visacard

CARDHOLDER NAME (please print): _____

CARD NUMBER: ____ / ____ / ____ / ____ EXPIRY DATE: ____ / ____

with the amount of \$ _____ being for _____ duplicate result/s @ \$33 per copy.

SIGNATURE OF CARDHOLDER: _____ DATE: _____

PROOF OF IDENTITY

If you have no proof of identity, please have the following section completed by someone who is described as an authorised witness under the *Oaths, Affidavits and Statutory Declarations Act 2005* and who is **NOT** related to you by birth or marriage. For example, a Justice of the Peace; lawyer; police officer; pharmacist; post office manager; teacher.

WITNESS STATEMENT

I certify that _____

is known to me and that he/she has signed this form in my presence.

WITNESS SIGNATURE: _____ DATE: _____

OCCUPATION: _____

NAME (please print): _____

ADDRESS: _____

POSTCODE: _____

TELEPHONE: _____

Office use only

Checked ID	CheckedManual	Photocopied	Posted/Collected
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