

Application for Completion Letter

*Letters will be mailed by Friday of the week following receipt of application.
Please note: A completion letter cannot be issued until all results are finalised and released.*

1. Student Details: Please provide documentation of your full legal name e.g. Birth certificate

Student number	
Title	
First name	
Middle Name	
Surname	
Date of birth	
Email	
Postal Address (Please include your state and postcode)	
Local Address (Please include your state and postcode)	

2. Course Details

Full title of your course	
Campus	<input type="checkbox"/> Blackburn <input type="checkbox"/> Brisbane <input type="checkbox"/> Melbourne CBD <input type="checkbox"/>

I declare that the information I have provided on this application is true and correct.
 I am aware that the Health Skills Australia Student Handbook is available online at www.healthskills.com.au .
 By signing this form I acknowledge that I have read and understood the policies, procedures and terms set out in the Health Skills Australia Student Handbook and I agree to be bound and abide by the policies, procedures and terms set out in the Student Handbook, as amended from time to time.

X

Date:

(Sign here)

Received by: Office use only

Date: Office use only

LODGING THIS FORM

This form may be lodged in person at any HSA campus, sent by mail, or scanned and emailed to:

Blackburn Campus
184 Whitehorse Rd,
Blackburn
VIC 3130

Brisbane Campus
 Ground Floor, East Tower,
 410 Ann Street
 Brisbane
 QLD 4000

Melbourne Campus
 Level 3,
 206 Bourke Street
 Melbourne
 VIC 3000

Ph: 1300 306 886

Ph: 1300 306 886

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Em:

Em:

Em:

HSAAdministration@navitas.com

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