1. **Type/s of Award Required**
   
   Please select Award type required: *(for further information refer to TAFE Division Schedule of Awards)*

<table>
<thead>
<tr>
<th>AWARD TYPE</th>
<th>✓</th>
</tr>
</thead>
<tbody>
<tr>
<td>TYPE C - STATEMENT OF ATTAINMENT</td>
<td></td>
</tr>
<tr>
<td>Issued to recognise successful completion of nationally endorsed units of competency or nationally endorsed modules that fall short of a full AQF qualification or completion of a nationally accredited short course.</td>
<td></td>
</tr>
<tr>
<td>TYPE D - STATEMENT OF ACHIEVEMENT</td>
<td></td>
</tr>
<tr>
<td>Issued to recognise successful completion of a University of Ballarat internally approved course <em>where assessment has taken place</em></td>
<td></td>
</tr>
<tr>
<td>TYPE E - STATEMENT OF ATTENDANCE</td>
<td></td>
</tr>
<tr>
<td>Issued to recognise attendance at courses or units/modules for which:</td>
<td></td>
</tr>
<tr>
<td>• there has been no assessment; or</td>
<td></td>
</tr>
<tr>
<td>• there is assessment but a student elects not to be assessed.</td>
<td></td>
</tr>
</tbody>
</table>

2. **Attach details of any symbols/logos or other customisation required**

   *Contact Student Centre Staff (SMB or Horsham Campus) to discuss requirements*

3. **Provision of Student Details**

   Attach documentation showing: *(eg: internal assessment sheet, statement of results)*

   - Full Name of Student
   - Student ID Number
   - Assessment results *(for Statement of Attainment and Statement of Achievement)*
   - Attendance Record *(for Statement of Attendance)*

4. **Authority of Course:**

   - Nationally Recognised Training
   - University Council
5. **Course (Syllabus) Title & Code:** .................................................................
(Ensure correct national titles & codes are used for nationally recognised courses)

Please attach a copy of Syllabus

6. **Unit/Module Title/s & Code/s:** .................................................................
(Can be highlighted on attached Syllabus)

7. **Group ID/s:** ............................................................................................
(Complete if Awards are for an entire group or groups)

8. **Is Skills Set Wording Required?** ............................................................

If yes, indicate Skills Sets Registration Number: ...............................................

9. **Hours of Duration:** ..................................................................................
(If relevant)

10. **Total Number of Awards:** ....................................................................

11. **Date of Issue to appear on Award/s:** ............../......./........

12. **Date Award/s are required by:** ............../......./........
(PLEASE NOTE: A minimum of 12 working days is required for processing)

13. **Name of person submitting application:** ..............................................

---

**Authorisation by Dean of School or Delegated Officer**

I hereby certify that the attached list of recipients are eligible to receive the listed award

Program Area: .................................................................

Campus: .................................................................

Ext No: ...................... Date: ......................

(Signature: Dean of School)

(Print Name)

---

**Authorisation by Chair – Academic Board**

I certify that:
- I have sighted the list of recipients and a copy of the Award/s to be issued and agree they are correct and can be issued to students
- my scanned signature may be used on the Award/s

Signature: Chair – AB Date

---

**Student Centre Use Only:**

Current authorisation on file from Dean of School for use of scanned signature.

File No.