

## **Workforce Education Institute**

RTO Number: 51161 CRICOS 03963B Trading as Workforce Education Institute Address: 372 Spencer St, West Melbourne VIC-3003

## **Student Letter Request Form**

## ENSURE ALL FIELD ARE COMPLETED: PLEASE IDENTIFY THE TYPE OF LETTER REQUIRED

STUDENT ID:	DoB:
NAME:	
COURSE:	
EMAIL ID:	MOBILE:
TYPE OF REQUEST	□ Welcome letter □ Enrolment confirmation letter □ Term Break Letter □ Course progress letter □ Payment confirmation letter □ other, please specify: □ Please approach the finance department (with this form) for approval prior to
	submission of the request
Student Comments:	
Student Signature: Date:	
OFFICE USE ONLY	
Approved by Finance:	
Signature:	Date:
Request Processed By:	
Signature:	Date: