Request for Australian Higher Education Statement (AHEGS)

MACQUARIE University

Post or email all correspondence to:
Student Connect
18 Wally's Walk, Level 2 MUSE
Macquarie University 2109

Tel: 61 2 9850 6410
Email: transcripts@mq.edu.au

Personal Details

Student ID Number | | | | | | | | | Date of Birth | | | | | | |

Given Names _____ Family Name _____

Postal Address _____

Email _____ Phone No _____

Course Details

If there is an error on your original AHEGS, or you received a prize after graduation please list the changes below (you are required to surrender your original AHEGS before receiving you amended copy). You will need to submit documentary evidence supporting any change of name, ie. Passport, Driver's Licence, Marriage Certificate, Change of Name Certificate

_____

_____

AHEGS policy http://www.mq.edu.au/policy/docs/ahegs/policy.html

ALL DEBTS MUST BE PAID BEFORE AHEGS WILL BE RELEASED

Cost: $25 per copy
Requests received by 4.00pm each Tuesday will be processed by the following Friday and be available for collection from Student Connect or will be posted.

To enable the University to fulfil its obligations under the Privacy and Personal Information Protection Act (NSW) 1998, you must submit a specimen of your signature as it appears on a legitimate form of personal identification (eg. driver's licence, passport, etc). You need to provide this before you request can be processed.

Signature: _____ Date: _____ No of Copies ☐

Forwarding Instructions

☐ Mail to your postal address (attach a separate page if you require your AHEGS to be sent to several destinations)

☐ Tick here if you wish to collect your AHEGS from the Student Connect at 18 Wally's Walk C7A MUSE, Level 2

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Payment Details

Please Note: We are unable to provide a refund if a request is submitted multiple times. All requests received are considered genuine requests. Payment can be made by cheque, money order or credit card **(Visa, Mastercard, Bankcard or AMEX only**). Please make cheques and money orders payable to "Macquarie University". For credit card payments, enter your card details below.

Cardholder number | | | | | | | | | | | | | | | | |

Type MasterCard Visa BankCard Amex

Expiry Date | | | |

Cardholder Name _____ Amount $ _____ Signature _____

Office Use Only Transcript A/C T04/4200 2001 117 $ _____ Cheque/Money Order/Cash/Credit Card

Name: _____ Student ID: _____