

## Authorization Request for Documents on Behalf of Student

Please complete the form in full when requesting another person to collect documents on your behalf.

Deakin College Student ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Family Name: \_\_\_\_\_ Given Name /s \_\_\_\_\_

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Phone number: \_\_\_\_\_

I, \_\_\_\_\_ (your name)

authorize \_\_\_\_\_ (your proxy's name) to collect the following document/s on my behalf:

- Academic Transcript
- Graduation Certificate
- Receipt
- Other (please name) \_\_\_\_\_

**N.B. Identification with a photograph on it (e.g. passport or driver's licence) must be produced when collecting the document.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I confirm that I have collected the document/s as listed on this paper for the above student.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only:**

Document Printed by \_\_\_\_\_ Date: \_\_\_\_\_

Date Collected Entered on MAZE \_\_\_\_\_ Date: \_\_\_\_\_