REQUEST FOR REPLACEMENT TESTAMUR

This form is to request a replacement testamur (degree certificate) due to the original being lost or damaged, or due to a name change of the graduate.

1. PERSONAL INFORMATION

<table>
<thead>
<tr>
<th>USC Student ID number</th>
<th>Family name:</th>
<th>Given name:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Contact telephone number:</th>
<th>Email address:</th>
</tr>
</thead>
</table>

2. REQUIRED DOCUMENTS

You are required to submit below documents:

- A Commonwealth Statutory Declaration (www.ag.gov.au/statdec) must be submitted with your form. This is because a testamur is a legal document of which there can only be one copy. If you are in a country where there is no equivalent to a Justice of the Peace, please have the statutory declaration signed by a lawyer.
- Original Testamur to be provided if testamur is being replaced due to a name change and/or damaged certificate.
- If you are requesting replacement due to a name change, certified documentation to support your change of name must be provided. See Section 4. CHANGE OF NAME for more details.

Note: Your request will NOT be processed until ALL required documentation has been submitted.

3. PAYMENT AND COLLECTION

An email will be sent to you with instructions on how to pay online for the requested testamur.

- Replacement Testamur - Lost/Damaged ———— $50
- Replacement Testamur - Name Change ———— $100
- Registered Postage within Australia ———— $5
- Registered postage to an international address —— $20

Note: All amounts are in Australian Dollars

4. CHANGE OF NAME

If this request for replacement is due to your name change, you must complete this section.

Your new name:

<table>
<thead>
<tr>
<th>Title:</th>
<th>Family name:</th>
<th>Given name:</th>
<th>Other names:</th>
</tr>
</thead>
</table>

Reason for Change of Name (Please tick applicable box)

- [ ] Change of name with Registry of Births, Deaths and Marriages
- [ ] Reversion to former name
- [ ] Incorrect spelling on University records
- [ ] Change of name on testamur (e.g. additional family names, change of order of names)
- [ ] Other, please state: ____________________________________________________________

You must attach certified documentation to support your change of name.

Documentation must be in the form of a certificate such as a marriage certificate, change of name certificate, passport, birth certificate or driver’s licence.

All copies of certified documentation must be:

a. sighted by USC Student Central staff when lodging in person at Student Central; or
b. certified by a Justice of the Peace or equivalent when lodging by mail.

Note: Emailed and faxed versions of documentation will not be accepted.
REQUEST FOR REPLACEMENT TESTAMUR

5. GRADUATE DECLARATION

I agree that I am authorised to request this information from USC. All necessary documentation is attached and information provided above is correct. I acknowledge that incomplete information may result in the application being returned to me.

Graduate signature: _________________________________________________ Date: _________________________________

PRIVACY STATEMENT

The information on this form is being collected for the express purpose of processing your request and will not be disclosed to third parties. The University of the Sunshine Coast Privacy Policy is located at: www.usc.edu.au/privacypolicy

FURTHER INFORMATION

Please see USC website for details, instructions and further information: www.usc.edu.au/graduation

<table>
<thead>
<tr>
<th>ENQUIRIES</th>
<th>LODGEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>In person: Student Central, Ground floor, Building C, Sippy Downs Campus</td>
<td>In person: Student Central, Ground floor, Building C, Sippy Downs Campus</td>
</tr>
<tr>
<td>Email: <a href="mailto:studentcentral@usc.edu.au">studentcentral@usc.edu.au</a></td>
<td>Email: <a href="mailto:transcript@usc.edu.au">transcript@usc.edu.au</a></td>
</tr>
<tr>
<td>Tel: +61 7 5430 2890</td>
<td>Fax: +61 7 5430 2882</td>
</tr>
<tr>
<td>Mail: Student Administration – ML23 University of the Sunshine Coast Maroochydore DC QLD 4558</td>
<td></td>
</tr>
</tbody>
</table>

STUDENT ADMINISTRATION OFFICE ONLY (Tick if Yes)

☐ 1 – Statutory Declaration submitted
   Initials: __________________________ Date: __________________________

☐ 2 – Name Change actioned on PeopleSoft (if applicable)
   Initials: __________________________ Date: __________________________

☐ 3 – Email sent requesting payment
   Initials: __________________________ Date: __________________________

☐ 4 – Payment received
   Initials: __________________________ Date: __________________________

☐ 5 – Testamur Printed
   Initials: __________________________ Date: __________________________