

SRG25 - RETRIEVAL REQUEST FORM

Please complete using BLOCK letters



If you require the return of an original document submitted for assessment, or a photocopy (uncertified) of an item submitted for assessment, you may request a Retrieval. Not all original documentation can be returned. Please seek confirmation from VETASSESS regarding your request before you lodge your request for Retrieval.

Please note that only an agent who was authorised in the original application may make a request on behalf on an applicant. Newly appointed agents must complete an SRG07 - Agent Authorisation form.

Retrieval requests for original documents attract a fee of AUD \$60.00 per request.

Retrieval requests for a photo copy of certified documents attract a fee of AUD \$30.00 per request.

APPLICANT FAMILY NAME (surname): _____

APPLICANT GIVEN NAME/S: _____

DATE OF BIRTH: ____/____/____
DD MM YY

FILE No.

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I, _____, the above named applicant/the authorised agent for the above named applicant, hereby request a Retrieval of the following (tick ✓ selection).

Photocopy of document (specify): _____
(AUD \$30.00 per request)

Return of original document (specify): _____
(AUD \$60.00 per request)

APPLICANT/AGENT SIGNATURE: _____ DATE OF REQUEST: ____/____/____

AGENT NAME (if applicable): _____ (PLEASE PRINT)



Please confirm your current postal address and contact information:

TELEPHONE: _____ MOBILE: _____ FAX: _____

EMAIL: _____

ADDRESS FOR CORRESPONDENCE: _____

Postage options (if applicable)
(Select ✓ one only)

- Registered Australian mail – AUD \$5.00
- Express Post International – AUD \$16.00
(not traceable outside Australia)
- Express Courier International – AUD \$34.00
(traceable in major cities outside Australia)



Payment must be made in Australian dollars. Bank cheques/drafts should be made payable to VETASSESS. Please complete the following payment section for Visa or MasterCard credit card payments. Please note that this fee is not refundable.

I, _____ authorise VETASSESS to debit my credit card by the amount of AUD \$ _____ for the payment of my Retrieval Request.

Name of Cardholder: _____

Card Number: _____ Expiry Date: ____/____ Card Validation Code: _____

Signature of Cardholder: _____

Please note that the applicant signature must match the signature as it appears on the original application. Signature discrepancies can cause significant delays.



Mail to: Skills Recognition- General Occupations
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AUSTRALIA
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