**BQ4.1.1 Access to Records**

**Request Form**

**Use this form to**

* Request access to client/student records held by National First Aid. All requests must be accompanied by a copy of identification for the individual in order to verify their identity named.

As per ASQA’s General Direction and National First Aid Policy, student assessment records are only maintained for 6 months unless required for licensing or other purposes. For this reason, any requests for assessment records older than 6 months may not be fulfilled.

**Submitting this request**

Email your completed form to: nfaadministration@nationalfirstaid.com.au or via post to: **PO Box 7029, Beaumaris Victoria 3193.**

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| **Personal details** |
| First name |       |
| Last name |       |
| Date of birth  | Day |       | Month |       | Year |       |
| Residential address | Street address |       |
|  | Suburb/town |       | Postcode |       |
| Home phone |       | Work phone |       |
| Mobile |       | Email |       |
| **I wish to request access to the following records?** |
|       |
| **How would you like to access these records?** |
| Copy posted to me |[ ]  View the records in person |[ ]  Collect a copy in person  |[ ]   |
| **Proof of identity** |
| **We require you to provide proof of your identity as the student named above. I am providing the following as evidence (choose one only)** |
| Passport |[ ]  Birth certificate |[ ]  Drivers licence / proof of age card |[ ]   |
| **Declaration** |
| I declare that, to the best of my knowledge, the information on this form is correct and complete. |
| Signature |       |
| Date  |       |

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| **OFFICE USE ONLY – Processed by:** |
| Refund authorised by: |       | Date paid: |       | Refund amount: |       |
| Method of payment: |       |