Progressive Training ™

(WA) Pty Ltd



RTO 5274

ABN 49 115 478 003

Attainment or Certificate	e of Participation.	777000	riamo	10 011 1110	Quai	modire	ni, Ota	iomoni oi
Surname:	First Name:							
Address: (Postal)	Post Code:							
Email:				•				
Phone No:				DOE	3:			
Signature:				Date	: :			
PLEASE ENCLOS	SE A COPY OF YOUR	R DR	IVER'	S LICEN	CE F	OR II	DENT	IFICATION
Reason for the Request of Reissuance								
Details of Qualification/Statement of Attainment Approximate Date						imate Date		
Type of Reissuance					Fees ✓			
Qualification Certificate or Statement of Attainment (includes card if required)				\$55.00 (incl. GST)				
Card for RII Training (Plant machinery) completed			\$33.00 (incl. GST)					
	Cheque		To: Progressive Training (WA) Pty Ltd					
PAYMENT	Cash							
DETAILS Payment Total: \$	Purchase Order		PO Number:					
	Direct Deposit		BSB : 306-012 ACC : 0699917			99917		
	Credit Card *(2% additional charge applies)		Num	ber:				
			Expi					

Return form to Progressive Training (WA) Pty Ltd via:

Email: admin@progressivetraining.com.au Post: PO Box 1854 Geraldton, WA 6531.

OFFICE USE ONLY						
Date Received:						
Form Complete:	□ YES	□ NO	*Notify requestor if not complete*			
Copy of Driver's Licence:	□ YES	□ NO	*Notify requestor if not submitted*			
Correct Fees Paid:	□ YES	□ NO	*Notify requestor if fees incorrect*			
Date Reissued:		•	Date Filed:			

This document is UNCONTROLLED in hard copy – Progressive Training (WA) Pty Ltd						
Prepared by:	Elaine Belson	Title:	Reissue of Certification Request	Issue Date:	July 2013	
Reviewed by:	Tanja Parry	Code:	TA 3.06.01	Last Reviewed:	April 2021	
ONCE THIS FORM HAS BEEN UPDATED, ENSURE THE LATEST VERSION IS UPLOADED ONTO THE WEBSITE						

^{*}Reissues can only be allocated to the person whose name is on the Qualification. Statement of