



Step 1: Personal Details

Student number: _____

Title: Ms / Miss / Mrs / Mr / Dr

Surname: _____

Given name(s): _____

Step 2: Units Applied for Resit Examination

UNIT CODE: _____ UNIT NAME: _____

UNIT CODE: _____ UNIT NAME: _____

UNIT CODE: _____ UNIT NAME: _____

Step 3: Student Declaration

I have read and understood Top Education Institute's Examination Policy.

I understand that by signing this form I confirm that all the information provided are true and accurate.

Student signature: _____

Date: ____ / ____ / ____

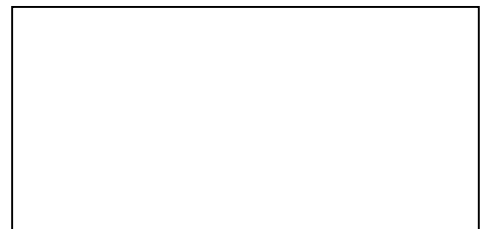
Step 4: Resit Examination Payment (AU\$400.00)

The Student has made the payment.

Signature: _____

Finance Department

Stamped:



Step 5: Return Form

Please return the form to Academic Department once when you make the payment.