PSB Academy Pte Ltd 355 Jalan Bukit Ho Swee Singapore 169567 Tel (65) 6885 1000 Fax (65) 6276 3103 Email contactus@psb-academy.edu.sg www.psb-academy.edu.sg Co. / GST Reg. No. 200704825E



REQUEST FOR ADDITIONAL COPY OF OFFICIAL TRANSCRIPT / CERTIFYING LETTER / COURSE OUTLINE / CERTIFICATE

Instructions:

- Request for an additional Official Transcript / Certifying Letter / Course Outline / Certificate should be
 accompanied by an administrative fee (as indicated below); made payable to "PSB Academy Pte Ltd" if
 payment is made by cheque. You can submit this form and proof of payment to the Student Services
 Centre.
- 2. Official Transcript / Certifying letter / Course Outline will be ready for collection **1** week from the receipt of request.

Reprint of Certificate(s) will be ready for collection 4 weeks from the receipt of request.

Please refer the collection details appended below:

Operating Hours:	Mondays – Fridays: 8:30am – 7.30pm Saturdays: 8.30am – 2.30pm *Closed on Sundays and Public Holidays
Venue	PSB Academy Blk A, Level 1, Student Services Centre, Unit (A-107)
Note	Please fill in and bring along this form and proof of payment (Receipt issued by PSB) if your request is via email.

Note: For records prior to September 2009, PSB Academy adopts a 5-year retention policy. As such, for records prior to September 2009, we may not be able to service request for official records beyond the 5-year period.

SECTION A: CANDIDATE'S DETAILS							
Name of	Candidate (as in NRIC/ I	NRIC No./ FIN / Passport No. (Include prefix)					
Handphone No.		Home Tel No.			Email Address:		
Programme Title							
Year Graduated / Duration of programme taken with us:							
Request:							
	Official Transcript*						
	Certifying Letter*						
•	Course Outline*	() \$20	No. of copies:			
•	Re-print of Certificate*	() \$160	No. of copies:			
Remarks by candidate (if any):							
*Please turn to the page 3 for details							



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SECTION B: FOR OFFICAL USE (TO BE COMPLETED BY EXAMINATION CENTRE)					
Programme Schedule:					
Exam Executive ID & Signature	Date				
Cert number(s) issued (if applicable):					
 Exam Manager ID & Signature	Date				
SECTION C: ACKNOWLEDGE OF RECEIPT (OF OT / CI	L / CO / CERT) BY CANDIDATE				
Collected by:					
Candidate Name and Signature	Date				



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Document	Contents / Information
Official Transcript	a.) Student's Details b.) Programme Title c.) Module Titles d.) Duration of Modules e.) Student's Results
Certifying Letter	a.) Student's Details b.) Programme Title c.) Duration of Programme d.) Classroom Hours e.) Medium of Instruction f.) No. of Modules Passed (if the student did not pass all prescribed exams in the course)
Course Outline	a.) Programme Title b.) Course Objectives c.) Minimum Entry Requirements d.) Course Structure e.) Duration of Programme (e.g. classroom hours) f.) Detailed Modules' Description
Certificate	 a.) The re-printed certificate will contain the statement, "Date of Reprint" and the reprinted date. Please note that PSB Academy is <u>unable</u> to service request for certificate reprints for: (i) Cambridge-validated programmes (CIE) (ii) For records prior to September 2009

