

Office of Maritime Communications – Examination Lodgement Form

THE INVIGILATOR IS REQUESTED TO COMPLETE THIS FORM AS IT PLAYS AN EXTREMELY IMPORTANT ROLE IN OUR INTERNAL CONTROL PROCESS

Details of applicants and exam papers enclosed:

	Name <i>(Please list all applicants)</i>	MROCP	MROVCP	MSCCE ((SATCOM))	Application is completed correctly	Photo endorsed and enclosed	Payment by Candidate enclosed	Invigilator/Organisation payment			
								c/card as below	Cheque	On-line Receipt number	Other please Specify
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
Total payment required		\$		Total Payment Enclosed				\$			

I certify that I have conducted the examination in conformity with current guidelines for invigilators and that there is no conflict of interest (i.e. relative sitting examination).

Signed: _____ Date: _____

Please print name: _____

Organisation: _____ (pro form invoice required - PTO)

Invigilator result letter to? _____

Forms with card details can be dispatched via post and faxed but not via email as it is considered to be unsecure.

Payment by invigilator card as indicated by **X** in credit card column above.

Authorised amount \$ _____ By Visa or Mastercard (please circle).

Card Holder's name: _____ Cardholder's Signature: _____

Expiry Date: ____ / ____

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1. If a pro forma invoice is required please give details:

Invoice to: _____

Fax to: _____ Order number: _____

For _____ students as listed/indicated on front page. Attn: _____

2. Please list any general comments you wish to make and any problems that occurred whilst invigilating the exam:

Attach a further sheet if necessary

3. I wish to advise the Office of Maritime Communications of the following changes to my contact details:

4. The invigilator who requested the issue of the exam package is responsible for its return within one month of the original issue date. If you were not the invigilator who requested the exam package please list the requesting invigilator/s so that the return can be receipted against the appropriate person.

All Exams must be returned to:

By Australia Post:
Australian Maritime College
Locked Bag 1394
Launceston TAS 7250
Phone 1300 365 262 or 03 6324 9869
Fax 03 6324 9885
Email amcom@amc.edu.au
Web site www.amcom.amc.edu.au

By Courier:
University of Tasmania
Office of Maritime Communications
Newnham Drive
LAUNCESTON TAS 7250
Phone 1300 365 262 or 03 6324 9869
Fax 03 6324 9885
Email amcom@amc.edu.au
Web site www.amcom.amc.edu.au