



Application for Student Withdrawal

Student Name: _____ Student Number: _____

Course: _____

Class Group: _____

Phone: _____ Email: _____

Reason(s) for withdrawal:

Student Signature

Date

Authorised by:

Chief Executive Officer

Date

Student Services Officer

Date

Please submit this form to ANIBT Reception, located on Level 7, 474 Flinders Street, Melbourne VIC 3000, Australia. Please note: your application for withdrawal will be assessed within 10 working days and you will be notified of the outcome of your application in writing. If you do not have written confirmation of your cancellation of enrolment and you do not attend your scheduled classes, you will be marked absent and your attendance percentage will be affected.

**Tel: 61-3-9620 2922 Fax: 61-3-9620 2933 Email: info@anibt.vic.edu.au Web: www.anibt.vic.edu.au
Australian National Institute of Business and Technology Pty Ltd CRICOS: 02506B RTO: 21368**