

MECHANICAL INSTITUTE OF
TRAINING AND TECHNOLOGY**STUDENT REQUEST FORM – International & Domestic**

Section A: Personal Details							
Student ID		Date					
Surname		Given Name					
Address							
Suburb		State & Postcode					
Telephone Number		Email					
Terms and Conditions							
1. I will comply with all laws and regulations of Australia, including all requirements for students. 2. I will provide the appropriate documentation when unable to attend my class. 3. I will be active and participate in all class activities and assessments. 4. I will show respect to students, colleagues, teachers and staff. 5. I will update MITT of any changes with my current information. 6. I will be responsible for any action that causes harm or damage to students, colleagues, teachers, staff, equipment, furniture and/or property. 7. I agree that all late payments of fees will incur an interest charge. 8. I know that I have to pay the administrative fee to complete my request. 9. I agree that any request will take 10 working days to be processed after submission of this form.							
Requests (Please tick <input type="checkbox"/>)							
Re-Enrolment Fee \$500	<input type="checkbox"/>	Re-issue Student Card \$30	<input type="checkbox"/>	Re-issue CoE \$100	<input type="checkbox"/>	Leave of Absence (Suspension) \$50	<input type="checkbox"/>
Instalment Plan \$100	<input type="checkbox"/>	Re-issue Final Certificate \$50	<input type="checkbox"/>	Re-issue Statement of Attainment \$50	<input type="checkbox"/>	Interim Academic Transcript \$50	<input type="checkbox"/>
Certificate Postage \$20	<input type="checkbox"/>	Change of Course \$100	<input type="checkbox"/>	Review of Grade \$250	<input type="checkbox"/>	Confirmation Letter (Holiday or Invitation letter) \$50	<input type="checkbox"/>
RPL \$100 per unit	<input type="checkbox"/>	Credit Transfer \$100	<input type="checkbox"/>	Reassessment (3 rd submission) \$500	<input type="checkbox"/>		
Comments/Reason							
Declaration							
I declare that all the information I have given above is correct and complete. I confirm that I have read all the terms and conditions and agree to abide by those rules and any subsequent amendments. If any information is false or has been withheld, I accept that this may cause cancellation of my enrolment and/or further consequences.							
Student's Signature				Date			
Section B: Office Use Only							
Received By			Date				
Administration Charge: \$		Fee Information: Paid <input type="checkbox"/>		Not Paid <input type="checkbox"/>			
Document Entered Date	/...../.....					

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