Certificate Request Form

Step 1 – Student to fill in details.
Date: _______________ Date of Birth: (Day)____ (month)____ (year)____
Student Name: _________________________ Mobile Number: ___________________________
Certificate Requested: Please see attached list and fill in the appropriate course below.
1. ____________________________________________________________________________
2. ____________________________________________________________________________

Step 2 – Student to see program manager/coordinator for approval of units passed.
Has this student passed all units for competency in this qualification? Yes ___ No ___
Department Head Signature: _____________________________________________
Comments: ____________________________________________________________________________
_____________________________________________________________________________________

Step 3 – Student to sign, date and email.

Level 7, 474 Flinders Street, Melbourne VIC 3000
Tel: +61 3 9620 2922 Fax: +61 3 9620 2933 E- Mail: info@anibt.vic.edu.au Web: www.anibt.vic.edu.au

Student Acknowledgement:
1. I understand that I will be contacted via my ANIBT Student Email Account (not applicable to short courses) once the certificate has been issued, and it is my responsibility to collect it from ANIBT reception in a timely matter or inform Student Support in writing that I would like it posted and the address I would like it posted to.

2. I understand that if my application is unsuccessful (i.e. outstanding fees, existing NYC’s) the process will be cancelled and re-submission of this form is required. The 20 working days processing time will recommence from the date of re-submission.

Student Signature: _________________________ Date: _________________________

Student Copy – ANIBT Staff to fill in only
Student Name: _______________________ Student No: _______________________
Certificate to be collected on or after – Day______Month______Year_______
Please DO NOT collect your certificate before this date. You must reproduce this slip to collect your certificate.

ANIBT Staff Signature: _________________________ Date: _________________________