

Change of Student Information

INSTRUCTIONS:

QTDFO015 - ACBT (A)

This form should be used if the student wishes to inform acbt of change of address, telephone numbers or e mail address

I wish to amend my i	information in the portal ((Please ✓)
1) Address		
2) Telephone numbe	er 🗌	
3) Email address		
<u>New</u>		
<u>Old</u>		
Student ACBT ID :		Course:
Student Name :		
Date :		Student Signature:
	•	over to Student Records . ormation within 5 working days.
IMPORTANT NOTE		to notify ACRT Students Records Division in writing
or online of a chan	nge of address, telepho not liable if a stude	to notify ACBT Students Records Division in writing one number or e-mail address within 7 days of such ent misses important communication due to non-
×		
	Receipt of o	change of student Information at the student records
Student ID :		
Received date :		Signature of Officer :