



معهد البحرين للتدريب
Bahrain Training Institute



Official Withdrawal Application Form for Continuing Trainees

Name: _____ Programme: _____
ID Number: _____ Division: _____
Semester: _____ Training Year: _____ Phone Number: _____
Sponsor: _____ Phone Number: _____

Conditions

Conditions for Withdrawal with Excuse (WE):

1. WE is withdrawal from all registered units.
2. Withdrawal is permitted only for health reasons, accident/injury, and death of a family member or first/second-degree relative.
3. Withdrawal must be filed not later than two (2) weeks before the end of classes.
4. A duly accomplished Clearance Form must be submitted with the original and photocopy of medical/death certificate.
5. WE will not affect the applicant's GPA.

Conditions for Withdrawal with Permission (WP):

1. WP is withdrawal from one (1) or more units only.
2. Withdrawal must be filed not later than Week Thirteen (13) of the semester.
3. WP will not affect the applicant's GPA.

Conditions for Withdrawal (W):

1. W is withdrawal from either all units or maximum of three (3) units.
2. Withdrawal must be filed within the first four (4) weeks of the semester.
3. W will not affect the applicant's GPA.

Note: No trainee under probation is allowed to withdraw.

Have you ever filed for withdrawal before? Yes No

If Yes, specify number of semesters: _____ Sem 1 Sem 2 Training Year: _____

Withdrawal applied for: W WE WP Unit Code/s: _____

Please attach the necessary documents.

Trainee Signature: _____ Date: _____

For Sponsor Use Only

Sponsor's Name: _____

Signature: _____ Date: _____

Sponsor's
Stamp

For Registration and Division Use Only

Staff Name: _____

Signature: _____ Date: _____

HOD Name: _____

Signature: _____ Date: _____

Remarks: _____

Admission
and
Registration
Office
Stamp