

## TEACHER REGISTRATION BOARD

## REQUEST FOR CANCELLATION OF REGISTRATION

This form is to be used by teachers who hold current Provisional Registration or Full Registration wishing to cancel their registration in the Northern Territory.

Section 26A(1)(b) of the *Teacher Registration* (*Northern Territory*) *Act* 2004 ("the Act") provides the Board may remove a person's name from the register at their written request.

To ensure that teachers are fully informed before making the decision to cancel their registration, the Board has provided this form for teachers to print, complete, sign and return to the TRB NT if they wish their registration to cease.

Please return your completed form:

- By email trbregistration@trb.nt.gov.au
- By post TRB NT, GPO Box 1675, Darwin NT 0801

I (full name printed clearly)		
f (address printed clearly)		
confirm as follows:		
My TRB NT registration number is	(registration number print	ted clearly)
I understand that I cannot teach in a school in the Northern Territory unless I am a registered teacher, and		
that to teach unregistered in the Northern Territory is	s an offence under section 73 of the Act.	
I wish to cancel my registration with effect from		(date)
The reason for request for cancellation is:		
Telephone (Mobile)	)	
Email		
Signature	Date	
It is an offence under section 74 of the Teacher Registration (Northern Territory) Act to provide a false or misleading statement.		
OFFICE USE ONLY		
Date Received	APPROVED / NOT APPR	OVED (circle)
Further Action Required YES / NO (circle) If YES, provide reason		
Director Signature	Date	<del></del>
ctioned by Date Actioned		
Date Confirmed	Email Sent	<del></del>