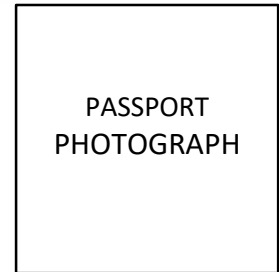




TRAINING INSTITUTE APPLICATION FORM



PLEASE PROVIDE THE FOLLOWING INFORMATION

1. SURNAME:
2. OTHER NAMES:.....
3. DATE OF BIRTH:
4. SEX: MALE/FEMALE:
5. NATIONALITY:
6. NAME OF PARENT/GUARDIAN:
7. RELATIONSHIP:
8. ADDRESS OF PARENT/GUARDIAN:
9. CONTACT OF PARENT/GUARDIAN (for communication):
10. CONTACT OF APPLICANT (if any):
11. PREVIOUS EDUCATIONAL INSTITUTION ATTENDED

NAME OF SCHOOL/COLLEGE	DATE OF ATTENDANCE	
	FROM	TO





12. QUALIFICATION

CERTIFICATE	YEAR	GRADE
.....
.....
.....

13. PREFERRED COURSE/COURSE OF CHOICE:

NOTE:

Any Applicant who makes a false statement may be refused admission or, he/she may be asked to withdraw once found out.

14. APPLICANT'S DECLARATION:

I hereby declare that the above particulars and information provided stands true and correct.

SIGNATURE: DATE:

15. DECLARATION BY WITNESS:

I certify that the photograph and information provided above are true with respect to the applicant and that he/she is personally known to me, and that to the best of my knowledge the certificates/result slips he /she is submitting are genuine.

FULL NAME & CONTACT:

DATE & SIGNATURE:

