



# INTEGRAL TRAINING INSTITUTE LTD

## COURSE APPLICATION FORM

### **Personal Details**

First Name:		Surname:	
Date of Birth:		N.I.C. No:	<input type="text"/>
Tel Number		Cell No	
Occupation		Email	
Residential Address			

### **Educational Background**

College attended		From		to	
SC subjects taken					
HSC/ A Level subjects					

### **Post Secondary Education**

Qualifications		From		to	
Qualifications		From		to	

### **Work Experience**

Name of Employer					
Position held		From		to	
Name of Employer					
Position held		From		to	
Name of Employer					
Position held		From		to	

### **Course applied for**

Please indicate below the preferred mode of Study (please tick)					
Full time weekdays	<input type="checkbox"/>	Weekday evenings	<input type="checkbox"/>	Sat mornings	<input type="checkbox"/>
Sat afternoons	<input type="checkbox"/>	Blended Learning	<input type="checkbox"/>	E-Learning	<input type="checkbox"/>
Start date					

### **Note: Payment of Fees**

(Please tick)

1. For Award courses, the application fee of Rs500/- has been enclosed along with application form	<input type="checkbox"/>
2. Sponsored candidates need to settle full payment of course fees along with application form If sponsored, Name and contact of delegating officer need to be specified in space below.	<input type="checkbox"/>
Delegating Officer	

### **Important Declarations**

1. I hereby confirm that I have carefully read the Institution's requirements (posted in the institution's website) regarding attendance, performance during studies, and declare that I shall abide by these.	<input type="checkbox"/>		
2. I have attached certified copies of the main qualifications mentioned above	<input type="checkbox"/>		
3. I certify that all the information provided above is true and correct	<input type="checkbox"/>		
Signature		Date	