



APPLICATION FORM

(Trainer's Certificate in Vocational Training)

TITLE : Mr./Mrs./Miss [ ] [ ] [ ] [ ]

SURNAME : ..... (BLOCK LETTERS)

OTHER NAMES : ..... (BLOCK LETTERS)

ADDRESS : .....  
.....

TEL. (Res) : ..... (Off) : ..... (Mob) : .....

EMAIL ADDRESS : .....

DATE OF BIRTH : ..... AGE: ..... SEX: MALE [ ] FEMALE [ ]

NATIONAL IDENTITY CARD NO. : .....

CAMBRIDGE SCHOOL CERTIFICATE

G.C.E'O' LEVEL RESULTS

YEAR : .....

YEAR : .....

SUBJECT	GRADE
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SUBJECT	GRADE
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**MAURITIUS INSTITUTE OF TRAINING AND DEVELOPMENT**

**Head Office**

**HIGHER SCHOOL CERTIFICATE**

YEAR : .....

SUBJECT	GRADE
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*Subsidiary*

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**G.C.E.'A'LEVEL RESULTS**

YEAR : .....

SUBJECT	GRADE
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**PROFESSIONAL QUALIFICATIONS :**

Certificate	Institution	Year

**ARE YOU A REGISTERED TRAINER? YES / NO**

**PRESENT EMPLOYMENT :** .....

**DATE OF PRESENT EMPLOYMENT :** .....

**NAME OF ORGANISATION :** .....

**ARE YOU SPONSORED BY YOUR EMPLOYER? YES / NO**

**IF 'YES', NAME, DESIGNATION AND ADDRESS OF SPONSOR :** .....

.....  
.....

I accept to sponsor the trainee, ..... for the course  
and to pay Rs ..... as course fee.

Date: .....  
*Signature & Seal of Sponsor*

Date : .....  
*Signature of Applicant*

**N.B : You are requested to attach photocopies of your birth certificate, educational certificates and National Identity Card.**