





Admission Form

| For Office Use Only | | Adm | ission/Memb | ership Form | | | |
|---------------------------------|--------------|----------------------------------|------------------------|--------------------|---------------|-----------|--|
| Admin Name: | | Form #: | | | | | |
| Registration No: | | Study Mode: Fas Face-to-Face: | t Track: 🔲 Onlin | VLMS Only: C |) | | |
| Registration Date: | | Admission Camp | us: | | | | |
| ATHE ID: | | Country: | | | | | |
| Course Start Date: | | Course End Date | : | | | | |
| Course App | olied For | | Please | List Two Cou | rses Priori | itv Wise | |
| Course Title(s) | Batch no | . Course Duration | Timing | Classes/week | Teachers | _ | |
| | | | a.m | | | | |
| | | | p.m | | | | |
| | | | a.m p.m | | | | |
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| Students | Informa | tion | | Please Fill i | n Block Lette | ers | |
| First Name: | | | Last | : Name: | | | |
| - not remov | | | | | | | |
| S/o, D/o, W/o: | | | | Iqama no.: | | | |
| Occupation: | Designat | ion: | С | NIC #: | | | |
| Organization: | National | ity: | P | ace of Birth: | | | |
| Date of Birth: | Gender: | | C | ourse Applied for: | | | |
| Purpose of Course: Immig | gration | Student Vi | isa | ☐ Job | Self E | mployment | |
| □ Other | | | | | | | |
| C uner | | | | | | | |
| Please Specify if Othe | r: | | | | | | |
| | | | | | | | |
| Proficiency Levels | | V.Poo | r Po | oor Fair | Good | V.Good | |
| Computer Skills: (Please Tick | One Only) | | | | | | |
| English Language Skills: (Pleas | e Tick One O | nly) | | | | | |
| Address: | | | | | | | |
| Student's Contact no: | | | Parent/Gua | rdian Contact no: | | | |
| Student's Email: | | | Parent/Guardian Email: | | | | |
| Emergency Contact no: | | | Emergency | Contact Person: | | | |
| | | | | | | | |

| Academic Hi | Stol y | Please illuica | te only last tw | o institutes | attended | |
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| Qualification | Awarding Body | Name of Institution A | ttended | | | Grade % |
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| arent/Guardiar | n Information | | | Please Fill ir | Block Let | ters |
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| lease Indicate How | v You Heard Abou | t Us: | | | | |
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