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# ONLINE STUDENTSHIP APPLICATION FORM

PLEASE FILL COMPLETELY IN CAPITAL LETTERS

TITLE(s):.....

FULL NAMES:.....  
Surname Other names

DATE OF BIRTH: ..... NATIONALITY.....

HOME ADDRESS: .....  
.....

MAILING ADDRESS: .....  
.....

MOBILE/TEL:..... HOME TEL:.....

E-MAIL:.....

## CURRENT EMPLOYMENT DETAILS

COMPANY NAME:.....

COMPANY ADDRESS: .....  
.....

NATURE OF BUSINESS:..... JOB TITLE:.....

TEL:..... FAX: ..... e-MAIL:.....

NAME & JOB TITLE OF MOST SENIOR MARKETING PERSON(S)

.....  
.....  
.....  
.....  
.....

(Please attach all relevant documents)

### EDUCATIONAL QUALIFICATIONS

	University/Polytechnic/College	Month and Year		Degree/Diploma, Certificate Obtained
		From	To	
(i)				
(ii)				
(lii)				

### OTHER PROFESSIONAL QUALIFICATIONS

	Name of Professional Body	Membership Status	Year of Admission
(i)			
(ii)			
(lii)			
(Iv)			
(v)			

### PREVIOUS EMPLOYMENT DETAIL

COMPANY NAME:.....

COMPANY ADDRESS: .....

NATURE OF BUSINESS:..... JOB TITLE:.....

TEL:..... FAX: .....e-MAIL:.....

### REFEREE DETAIL

NAME OF REFEREE:.....

COMPANY ADDRESS: .....

JOB TITLE:.....

TEL:..... FAX: .....e-MAIL:.....

SIGNATURE OF REFEREE:.....

### DECLARATION

I hereby declare that the above information is to the best of my knowledge, true and accurate.

SIGNATURE:.....DATE:.....