CARITAS BUSINESS COLLEGE

P.O. Box 2125, Boroko, NCD, Papua New Guinea
Telephone No: 323-6874 / 7288-9485 Email: registrar@caritas.ac.pg

APPLICATION FOR STUDENT ENROLMENT   ☐1st SEMESTER ☐ 2nd SEMESTER

PART 1: COURSE TITLE SELECTION
Please select/tick the appropriate course you wish to undertake.

☐ **1st PREFERENCE**   ☐ **2nd PREFERENCE**
   ☐ Diploma in Office Administration   ☐ Diploma in Office Administration

   ☐ Diploma in Tourism & Hospitality Management   ☐ Diploma in Tourism & Hospitality Management

PART 2: PERSONAL DETAILS
*Note: The name given/written on this application form **WILL** be printed on your Certificate / Transcript. If you decide to change the name, a **penalty fee of K200.00** will be charged to reprint the Certificate and Transcripts.*

Given Name: _____ Surname: _____ ☐Female ☐Male

Date of Birth: _____ Age: _____ Religion: _____

Mobile : _____ Email: _____

Home Province: _____ District: _____Origin: _____

Residential Address (Suburb) _____
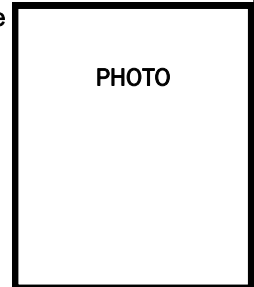
Emergency contact person: _____Mobile / Telephone No: _____
Person whom you are living with and relationship to you: parent, guardian, friend, etc.

Preferred Doctor _____ Mobile: _____Surgery _____

Clinic / Hospital: _____ Location: _____
It is the responsibility of the student to discuss any health problems and agree on a medical support plan with the Caritas Business College Administration before enrolling.

PHOTO

PART 3: EDUCATION QUALIFICATION & EMPLOYMENT HISTORY
*It is recommended that you attach **copies** of school certificates/report sheets and other support documents when applying. **Provide original certificates/report sheets for sighting**. This will enable you to qualify for the course you intend to study. Without proper documentation, the College will deny your entry unless approval is sought from the Administration.*

Name of School Last Attended & Location	Grade	Year

Name of Company , Location & Years of Experience

*A non-refundable **Registration Fee of K100.00** is to accompany this Application Form for Enrolment. This form and fee can be submitted at the Reception Office.*

Successful applicants will then receive a letter of offer outlining course fee payment requirements. Students/sponsor who do not pay 60% of the fee prior to course commencement will not be enrolled.

In completing and submitting this Application Form for Enrolment, I understand that the Caritas Business College will make every endeavor to enroll me in my first preference qualification providing I meet the minimum entry requirements.
I declare that the information supplied in this form and relevant attachment is true.

Student Name & Signature: _____   Sponsor's Name & Signature: _____

  Date: ___/_____/_____   Date: ___/_____/_____

Registration Officer Name & Signature: _____   Date: ___/_____/_____