

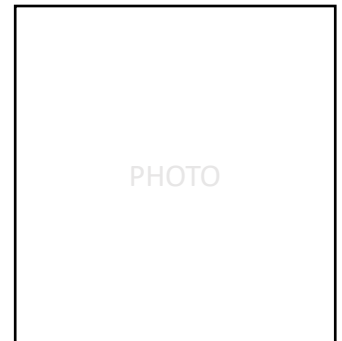


VERTEX GROUP EXPERTS
Masaki, Dar es Salaam, Tanzania
P.O. BOX 23161
www.vertexgroup.co.tz
Tell: +255 742850203 Email: info@vertexgroup.co.tz

STUDENT APPLICATION FORM

Application form. NO: _____

Please provide all the necessary information and read the important notice at the end of this form. You are also required to submit certified copies of relevant academic certificates with this application form



1. APPLICANT DETAILS

Surname: First Name:

Middle name: Age:

****Please write names as they appear on your academic certificates.**

Gender: (M / F) Date of Birth /... /..... Marital Status

Permanent Address:

Contact Tel: E-mail:

Occupation/ The highest level of education

Name and address of the Next of kin. (In case of emergency)

Name: Address:

Tel: E-mail:

Relationship:

2. COURSE SELECTION

(Please choose only three courses, starting with your first choice)

LONG COURSES

- | | |
|---|--------------------------|
| 1. CERTIFICATE IN HOTEL MANAGEMENT | <input type="checkbox"/> |
| 2. BEAUTY THERAPY AND HAIRDRESSING SALOON | <input type="checkbox"/> |
| 3. BUSINESS OPERATIONS | <input type="checkbox"/> |
| 4. CERTIFICATE IN JOURNALISM | <input type="checkbox"/> |

5. CERTIFICATE IN BUSINESS MANAGEMENT

6. CERTIFICATE IN TRAVEL AND TOURS

SHORT COURSES

1. CERTIFICATE IN COMPUTER APPLICATION

2. CERTIFICATE IN FRONT OFFICE

3. CUSTOMER CARE

4. ENTREPRENEURSHIP

5. GRAPHICS DESIGN

6. PHOTOGRAPHING AND EDITING

7. DIGITAL VIDEO EDITING

3. TYPE OF SPONSORSHIP

Government Private Company Organization

Name, address, and telephone number of the sponsor

.....

Do you have any physical or
Communication disabilities?

Yes No

If yes, please provide details;

Have you ever been convicted of a Criminal Offense?

Yes No

If yes, please provide details;

Note: Information about your disability will not jeopardize your chances of being selected

4. EDUCATIONAL BACKGROUND

LEVEL	DURATION From - To	SCHOOL/COLLEGE UNIVERSITY	AWARD RECEIVED
A-LEVEL			
O-LEVEL			
PRIMARY			

5. WORKING EXPERIENCE

DURATION	ORGANIZATION/ COMPANY	POSITION HELD

IMPORTANT NOTE

1. Affix your photograph taken within the last 6 months
2. Attach certified true copies of academic certifications, transcripts, and birth certificates.
3. The application form should be sent to your first priority to the address above with a non-refundable fee of Tshs 10,000/=
4. Tuition fees once paid cannot be refunded or transferred under any circumstances.

6. APPLICATION DECLARATION

I declare that all the information given are true and correct, And accept all the terms and conditions, ready to follow all the rules and regulation as per the institute's policy.

Applicant signature:

Date: .../.../202....

PAYMENTS DETAILS:

1. BANK NAME: NATIONAL BANK OF COMMERCE (NBC)

ACCOUNT NAME: VERTEX GROUP EXPERTS

ACCOUNT NUMBER: 053103005560 (TZS)

ACCOUNT NUMBER: 053105001582 (USD)

2. BANK NAME: COOPERATIVE AND RURAL DEVELOPMENT BANK (CRDB)

ACCOUNT NAME: VERTEX GROUP EXPERTS

ACCOUNT NUMBER: 0150706412100 (TZS)