



Block A, MITD Complex,
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FOR OFFICE USE ONLY	
Application No.	
Screened by:	
Date:	

APPLICATION FORM FOR SHORT COURSES

1. SURNAME

Name(s) Mr/ Mrs/ Miss.....

Maiden name (if applicable)

(Enclose photocopy of marriage certificate)

2. DATE OF BIRTH

3. SEX

4. MARITAL STATUS

5. NATIONALITY

National ID No:

Day	Month	Year	Male	Female	Married	Single	Mauritian	Other																				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>																			

If not Mauritian, specify

(Please attach copy of ID Card/Other Identification/Passport)

6. ADDRESS FOR CORRESPONDENCE

Telephone No. Home:

.....

Office:

.....

Mobile:

.....

Fax No. (if any):

.....

Email:

7. SHORT COURSES APPLIED FOR (In Order of Preference)

S/N	Name of Short Course	Full Time	Part Time
1			
2			
3			

8. EDUCATIONAL DETAILS (Please tick where appropriate and attach copies of Academic Qualifications)

School Certificate (SC) Higher School Certificate (HSC)

Certificate Diploma

Degree Master Degree

Doctoral Degree

Other Qualifications:

9. THIS SECTION SHOULD BE FILLED IN BY THOSE IN EMPLOYMENT

9.1 Give all relevant information about previous and current employment, if applicable, as follows:

From		To		Name & Address of Employers/Firms	Positions Held	Job Description
Month	Year	Month	Year			

9.2 This sub-section should be filled in if the applicant is sponsored by the employer.

Name of Employer Phone No. of Employer

(Tick as appropriate) Sponsored Released Release in process

Note: A Sponsored Applicant is one who will be released and the payment will be settled by the Employer.

9.3 Declaration of Employer

I/We hereby agree to Mr/Mrs/Missfollowing a programme ofat the Fashion & Design Institute and I/We undertake to release him/her to follow the said programme if he/she is selected.

Signature

STAMP OF EMPLOYER REQUIRED

Position

Date/...../.....

10. Have you any particular career in view?

Yes

No

If Yes, specify:

