Pacific Technical and Further Education (Pacific TAFE)

**REGISTRATION FORM: SHORT COURSE TRAINING**

# Course Information

|  |  |
| --- | --- |
| COURSE TITLE |  |
| DATE(S) |  | VENUE |  |

|  |  |
| --- | --- |
| **Personal Information** | **Employment Information** |
| FIRST NAME |  | OCCUPATION |  |
| MIDDLE NAME |  | ORGANISATION |  |
| SURNAME |  | ADDRESS |  |
| GENDER | Male Female |
| DATE OF BIRTH |  |
| MOBILE |  | TELEPHONE |  |
| EMAIL |  |
| POSTAL ADDRESS |  |
| NATIONAL ID |  |

I confirm that all the information given above is complete and correct.

Pacific Technical and Further Education (Pacific TAFE) reserves the right to postpone or cancel courses on the basis of insufficient registration or for any other reason that will be deemed necessary.

# NB:

**For Sponsored Participants, please indicate details (Sponsors name/address) to whom the invoice should be billed to:**

Applicant’s signature Date (dd/mm/yyyy)

**OFFICIAL USE ONLY**

**Fees**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Amount Paid/Invoiced | Receipt No. | Date | Pacific TAFE Staff Name | Signature |

*For Further Enquiries:*

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