

DEBBY ZEE TAILORING ACADEMY

**STUDENT APPLICATION FORM**

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| **Course Detail** | |
| Course |  |
| Start/ End date |  |
| Format |  |
| Fee |  |

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| **Applicant Details** |
| Full Name: |
| Date of Birth: |
| Nationality: |
| State of origin: |
| Permanent Home Address: |
| Emergency Contact Name: |
| Phone Number |

REQUIREMENTS

Scissors, Machine needles, Hand needles, Office pin, Tailoring picker, Different colours of Thread, Machine oil. E.T.C

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Official use only

**Declaration and signature**

I confirm that the above information given in this form is complete and accurate. I understand that the application or any subsequent place at DEBBY ZEE Tailoring Academy may be withdrawn by ZEE Tailoring Academy Ltd. If In the future then information provided to be inaccurate either intentionally or unintentionally.

By signing this form:

-I give my permission to DEBBY ZEE Tailoring Academy Ltd.to verify the information contained in this application with the relevant awarding body or

Referees provided.

-I give my permission to DEBBY ZEE Tailoring Academy Ltd. to store and process my data in line with the privacy notice.

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| Signature: | Date: |