

ACCREDITED NO.: 16-00
Initial Issue Date 11-20-2000
Revision Date: -

NYK-FIL MARITIME E-TRAINING, INC.

ENROLMENT REPORT

Course: _____ Class No.: _____
Class Schedule: _____ Bldg. & Room No.: _____
Practicum Site/Vessel: _____ Practicum Date: _____
Instructor/s: _____ Assessor/s: _____
Zoom Meeting ID _____

No.	Name of Enrollees	Date of Birth	Rank/Rating/ Position	Date of Enrolment	Signature of Enrollees
1					
2					
3					
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(Name of school if class is under MOA with a CHED Accredited Maritime School)

Certified Correct:

MS. CARMELA S. LAO GUICO
Planning, Research & Program Devt Manager
(Signature over Printed Name)

CAPT. ELISEO Z. CLEMENTE, JR.
Training Director
(Signature over Printed Name)