GIS COURSE APPLICATION FORM

*Please fill out a separate form* ***for each course*** *if registering for more than one.*

1. Title (Dr./Mr./Mrs./Ms./Prof.) …………………………………………………...........................

Last Name ......................

First Name .....................

1. Date of Birth ............................ .......................... ...............................

Day Month Year

1. Home Address ........................

.........................................................................................................................................................

Telephone Nos: Landline ...... Mobile ……….…………......................

1. E-mail Address..... ....................................................................................
2. List in the table the highest final level of education you have completed:

|  |  |  |
| --- | --- | --- |
| **Educational Institution** | **Final Year Completed** | **Qualification Obtained** |
| Secondary/High School |  |  |
| College |  |  |
| University |  |  |
| University Post Graduate |  |  |
| OTHER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

1. Specific Research Interest (s) ……………………………………………...……….......................................

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1. Training Type: Introductory Project Specific Software Specific

If you ticked *Project-* or *Software-* Specific for 7, give details. …………………………………………………………………..............……………………......………

…………………………………………………………………………………………………..…….

1. Company / Department Information

(Students, give information about the academic department to which you belong)

Position ........…

Name of Organisation......................................................................................................................................

Department ...........

Address .........…

Telephone Fax………………………………............…

Duties ..

1. Please tick your reason for attending the course

|  |  |
| --- | --- |
| **Reason for Attending** | **Tick Box** |
| Need qualification for confirmation in post |  |
| Need qualification for promotion |  |
| To improve work skills |  |
| To aid academic research |  |
| For personal and professional development |  |
| Other (please explain below):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

1. Have you ever participated in any GIS course before? Yes No
2. If answer to 10 is ‘Yes’, give details

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1. Please indicate the training days that best suit you (Introductory Course only):

*Mon & Wed* **or**  *Tues & Thurs*

1. Signature of Applicant Date

Name of Authorising Personnel

Title …………………….…………………. Signature ………..………….......................