



MAURITIUS INSTITUTE OF TRAINING AND DEVELOPMENT

Serial No

LYCEE POLYTECHNIQUE SIR GUY FORGET

François Mitterrand street, Central Flacq, Mauritius

Phone No: 413-2959/413-9262/413-1568

APPLICATION FOR ADMISSION OF TRAINEES

This form should be accompanied by photocopies of birth and educational certificates together with a non-refundable fee of Rs. 200/-. Please use BLOCK LETTERS to fill in this form.

PARTICULARS OF APPLICANT

SURNAME:

OTHER NAME/S:

NATIONAL IDENTITY NUMBER /STUDENT CARD NUMBER

Grid for National Identity Number / Student Card Number

ADDRESS: Email Address :

Sex: Male Female Phone: Residence Mobile

DATE OF BIRTH: AGE LAST BIRTHDAY:

PLACE OF BIRTH: NATIONALITY:

PARTICULARS OF APPLICANT'S RESPONSIBLE PARTY

NAME OF RESPONSIBLE PARTY/GUARDIAN:

RELATIONSHIP WITH APPLICANT:

NATIONAL IDENTITY NUMBER

Grid for National Identity Number of Responsible Party

ADDRESS OF RESPONSIBLE PARTY/GUARDIAN: Email Address :

PHONE No Residence Workplace Mobile

REMARKS (if any):

FIELD OF STUDY

*Please indicate order of PREFERENCE by inserting 1, 2, 3 & 4

Table with 2 columns: FIELD OF STUDY, **PREFERENCE. Rows include MECANIQUE AUTOMOBILE, PRODUCTION ET MAINTENANCE INDUSTRIELLE, ELECTROTECHNIQUE, BATIMENT.

Have you ever been offered a seat at the Lycée? YES NO

If yes, please indicate : Year: Field of Study:

Please Turn Over

QUALIFICATIONS

1. ACADEMIC QUALIFICATIONS (e.g Form V, SC, GCE, HSC)

(Please insert the best qualifications)

No	SUBJECT	YEAR	MARKS/GRADES				
			FORM V	SC	GCE 'O'	FORM VI	HSC
1	ENGLISH	
2	FRENCH						
3	MATHEMATICS						
4	ADDITIONAL MATHS						
5	PHYSICS						
6	ELECTRONICS						
7	CHEMISTRY						
8	TWENTY FIRST CENTURY SCIENCE						
9	DESIGN & COMMUNICATION						
10	DESIGN & TECHNOLOGY						
11	COMPUTER STUDIES						

Last School Attended : _____

Science subjects studied up to form IV - (Please produce justification from college attended)

2. OTHER TECHNICAL QUALIFICATIONS (Please enter details of other courses e.g NTC 2, NC3, NC4)

3. NON-AWARD COURSES FOLLOWED

COURSE	DURATION	INSTITUTION

DECLARATION

I declare that the particulars in the application form are true to the best of my knowledge and belief

Applicant's signature : _____ Date: ___ / ___ / ___

Responsible party / Guardian's signature : _____ Date: ___ / ___ / ___

For Official Use Only

Verified correct by: _____

Signature: _____

Date: ___ / ___ / ___

CERTIFICATE

Birth Cert	ID	F IV	F V	SC	GCE	HSC	Tech Cert.	N Aw Course	Others

FINANCE SECTION

Application fee:Rs. 200/-

Receipt No.: _____

Name of Officer: _____

Date: ___ / ___ / ___

Signature: _____