

MAURITIUS INSTITUTE OF TRAINING AND DEVELOPMENT PROFESSIONAL DRIVERS TRAINING CENTRE

REFERENCE:

16ème Mille, Forest Side

Tel: 664 0046 / 82 Email: pdtcregistry@mitd.mu

APPLICATION FORM

| 1.0 BIO DATA | | | | | | |
|---------------------------------|---------------|--|--|--|--|--|
| 1.1 SURNAME (Block Letters) | | | | | | |
| 1.2 OTHER NAMES (Block Letters) | | | | | | |
| 1.3 ADDRESS | | | | | | |
| | | | | | | |
| 1.4 TEL: Home | Office Mobile | | | | | |
| 1.5 EMAIL | | | | | | |
| 1.6 DATE OF BIRTH AGE | | | | | | |
| 1.7 NATIONAL IDENTIT | Y CARD NO. | | | | | |
| 1.8 ACADEMIC BACKGROUND | | | | | | |
| | | | | | | |

2.0 COURSE APPLYING FOR:

| COURSE | Course Fee | Please tick | COURSE | Course Fee | Please tick |
|--|------------|----------------|--|------------|----------------|
| Learner Driving for Goods Vehicle | Rs19,000 | | Theory for Learner Drivers for Goods Vehicle and Bus | Rs 2,500 | |
| Learner Driving for Bus | Rs19,000 | | Theory Course for Learner Car | Rs 2,000 | |
| Learner's Driving Course for Private Car | Rs 19,500 | | Goods Vehicle - Articulated Lorry Driving | Rs19,800 | |
| Others: | | | Industrial and Commercial Forklift Operation | Rs 8,200 | |

| VEHICLE | DATE OF DRIVING TEST | Driving Test at Police Traffic Branch, Please tick | | |
|-------------------------|-------------------------|--|---------------------------|--|
| VEHICLE | | Les Casernes, Curepipe | Line Barracks, Port Louis | |
| Private Car (MANUAL) | | | | |
| Private Car (AUTOMATIC) | | | | |
| Goods Vehicle | | | | |
| Bus | | | | |

3.0 DRIVING LICENSE DETAILS

| 3.1 DRIVING LICENCE NO: | |
|--|----------------------------------|
| 3.2 TYPE(S) OF VEHICLE FOR WHICH YOU ARE HOLDING A VALID | |
| (FULL) DRIVING LICENCE: | |
| 3.3 TYPE(s) OF VEHICLE FOR WHICH YOU ARE HOLDING A | |
| PROVISIONAL (LEARNER) DRIVING LICENCE: | |
| 3.4 HAVE YOU ALREADY PASSED ORAL TEST AT THE POLICE TRAFFIC BRAN | NCH FOR |
| IN THE COURSE YOU HAVE APPLIED FOR? | YES / NO |
| 3.5 HAVE YOUR LICENCE EVER BEEN ENDORSED / SUSPENDED? | YES / NO |
| | |
| 3.6 DO YOU HAVE ANY SERIOUS DISEASE, PHYSICAL DISABILITY OR MENTAL DISORDER? | YES / NO |
| 3.7 HAVE YOU BEEN CONVICTED OR CURRENTLY CHARGED FOR ANY CRIM OR MOTORING OFFENCE? | IE YES / NO |
| 3.8 IF THE ANSWER TO 3.5 – 3.7 OF THE ABOVE IS 'YES', PLEASE GIVE DET | AILS HERE |
| | |
| | |
| | |
| 4. IF YOU ARE SPONSORED BY YOUR COMPANY PLEASE FILL IN THE DETAIL | |
| NAME OF COMPANY (SPONSOR): | |
| CONTACT PERSON : DESIGNATION | ON: |
| POSTAL ADDRESS: | |
| TEL NO FAX NO EMAIL ADDRESS | 3: |
| 5. DECLARATION OF SPONSOR | |
| I, MR / MRS / MISS / Ms accept to spor | nsor our nominee (or personnel), |
| MR / MRS / MISS / Ms for the course (as se | elected at 2.0) and to pay the |
| sum of Rs as course fee. | |
| Date: SEAL OF ORGANISATION: | |
| Canada Clauses 1. The MITD recognize the winds not to mun the course | Signature of Sponsor |
| General Clause: 1. The MITD reserves the right not to run the courses. 2Only successful applications will be acknowledged | |
| 6. DECLARATION OF APPLICANT: | |
| I, MR / MRS / Ms declare that | (i) the above information I have |
| given in this application is truthful, complete and correct; (ii) I have read and under | |
| DATE : | Signature of Applicant |