



VOCATIONAL TRAINING INSTITUTE

P.O Box 144, BUEA
SW REGION, CAMEROON

Photo
4 x 4



REGISTRATION FORM

(To be completed in capital letters by the student)

General Information

Full Name: _____ Date of Birth: _____
Surname First Name M.I.

Phone: _____ Email: _____

Gender Male Female Marital Status: _____

Address: _____
Street Address or P.O Box

_____ Province
Town / City

In which course/program would you like to be trained? _____

Will you be attending the training on-site or online? ON-SITE ONLINE

Do you currently work for any Company? YES NO If yes, name of Company: _____

Languages English French Bilingual

Current Level of Education: _____ Last Graduation Year (if applicable): _____

Personal Information

Do you suffer from any health issues? If yes, explain: _____

Food Allergies? YES NO If yes, please specify: _____

Drug Allergies? YES NO If yes, please specify: _____

Asthma? YES NO

Others? YES NO If yes, please specify: _____

Are you currently undergoing medical treatment? YES NO

Emergency Contacts (Someone who we can contact in case of an emergency.)

1. Full Name: _____ 2. Full Name: _____

1. Phone: _____ 2. Phone: _____

Payment Agreement

I understand and agree to pay my registration fees and full tuition before the start of my training course or according to a moratorium granted by the administration. I understand that any balance in my account not paid in full will accrue a one-time service charge of 20% of the original balance. The tuition will be in default if not received by the first day of training. Student will not be admitted into the class and registration fee will be forfeited.

Full Name: _____

Disclaimer and Signature

I certify that the information provided above are true and complete to the best of my knowledge.

If accepted into the program, I understand that false or misleading information in my application may result in my release from the program. I agree to respect the discipline and to observe all the clauses of the internal rules in force in the academy.

Documents to be provided by all candidates:

- A photocopy of the most recent diploma (if available)
- A photocopy of the national identity card or valid passport
- Photocopy of the completed registration form

Signature: _____ Date: _____