

UNIVERSITY OF SWAZILAND
Consultancy and Training Centre (CTC)
Application Form (Short Course)



PARTICIPANT REGISTRATION FORM
(Please print IN BLACK pen OR type)

DATE:		COURSE APPLYING FOR					
APPLICANT INFORMATION							
LAST NAME		FIRST NAME		MIDDLE NAME		TITLE	MARITAL STATUS
OCCUPATION/ DESIGNATION:							
GENDER:							
NATIONALITY:				CONTACT TEL & MOBILE:			
EMAIL ADDRESS:							
POSTAL ADDRESS:							
LANGUAGES SPOKEN							
HOW DID YOU KNOW ABOUT CNA?	Media	Colleague	Friend	Work	Family	Brochure	Events
OTHER: Please specify							
GENERAL INFORMATION							
EDUCATION LEVEL	HIGH SCHOOL		COLLEGE/TECHNIKON		UNIVERSITY		OTHER SCHOOL
HIGHEST (Tick) QUALIFICATION							
WORK EXPERIENCE							
<p>I certify that the information on this application and its supporting documents is accurate and complete. Failure to comply represents grounds for elimination from enrolment. I authorize the information above to be used by the University of Swaziland (UNISWA).</p>							
APPLICANT'S SIGNATURE					DATE		
PLEASE INDICATE WHO WILL BE PAYING:							
SELF/ORGANISATION		NAMES:					
		SIGNATURE:					
EMPLOYER		NAME OF AUTHORIZING PERSON:			SIGNATURE AND STAMP:		
FOR OFFICE USE ONLY							
APPROVED BY:		SIGNATURE:			DATE:		

TERMS AND CONDITIONS OF PAYMENT

1.1 Training Fee

All fees include all training materials. Full payment of training fees is required before the Training course date commences

NB: Please note that hotel accommodation, travel and exam fees are not included in the price.

1.2 Cancellations/ Non- Attendance:

All cancellations must be received by Consultancy and Training Centre (CTC) in writing. Cancellations received in writing more than 21 working days prior to the event being held will attract a 50% (of the workshop fee) cancellation fee. Should cancellations be received between 21 working days and the date of the event, the full training fee is payable and non-refundable. Non- payment and non-attendance does not constitute cancellation. Non- attendance will be charged the full registration fee. Cash alternatives will not be offered, however substitutes at no extra charge are welcome. None attendance without notification is treated as cancellation with no entitlement to any refund.

Submit completed form to Bongekile Dlamini at dbongekile@yahoo.com or bodlamini@uniswa.sz Call Bongekile at 2518 6126

For payments liase with Cebisile Vilane at cvilane@sppra.co.sz or 2404 7527

SWAZILAND PUBLIC PROCUREMENT REGULATORY AGENCY BAKING DETAILS

Bank: Nedbank Swaziland

Account Name: SWD PUBLIC PROCUREMENT REGULATORY AGENCY

Account Number: 11990094731

Type of account: CURRENT

Branch Code: 360164

Swift Address: NESWSZMX

Alternatively

Please direct **purchase orders** to cvilane@sppra.co.sz