

PROVISIONAL REGISTRATION FORM

PERSONAL DETAILS

Title: Mr/ Mrs/ Ms/ Dr Surname (CAPS): _____

First Name: _____

NIC: _____

D. O. B: _____

Job Title: _____

Company Name: _____

Company Address: _____

CONTACT DETAILS

Residential Address: _____

Tel (Off): _____ Tel (Mob): _____

Tel (Res): _____ Fax: _____

Email _____

QUALIFICATIONS

Academic: _____

Professional: _____

RESPONSIBLE PARTY

Name: _____

Tel (Mob): _____

COURSE DETAILS

ICS (UK) Professional Qualifications

1. Foundation Diploma in:

Logistics & Multi modal Transport

Ship Operations & Management

Port & Terminal Management

2. Advanced Diploma in:

Logistics & Multi modal Transport

Port & Terminal Management

Awarding Body (MITD)

3. National Certificate in:

Customs Clearance

Shipping & Freight Forwarding

4. NAW courses:

Mastering Customs Clearance

Import/Export Procedures &

Documentation

Logistics and Warehouse Management

Logistics and Supply Chain Mngt

Islamic Banking Practices

5. CIBTAC UK Qualifications:

Diploma in Beauty Therapy Services

Certificate in Nail Treatments

Certificate in Facial Services

Award in Waxing

6: NAW course in Beauty / Wellness

Beauty Services (Manicure / Pedicure)

Make up Services

Sport Massage

Foot Reflexology

Abhyanga massage

Aromatherapy Massage

Stone Massage

*Final registration will be done upon verification of qualifications/documents and upon payment of fees at our office.