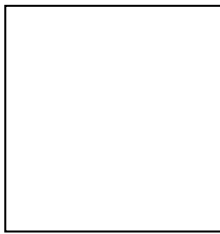




Application Form

PLEASE COMPLETE IN CAPITALS



I- General Information

a. Program Type: Professional Program Professional Diploma Short Term Module

b. Program Title

c. How did you hear about us?

New spaper Radio Website Friend Student (Please Specify)

II - Personal Information

First Name Middle Name Family Name

Name Required on the Certificate/Diploma Title Dr. Mr. Mrs. Ms.

Birth Date (dd/mm/yyyy) Nationality

Gender Male Female Passport No.

Courier Address

Street

Town / Emirate PO BOX Country

Mobile Phone Emergency Contact Name/Number

Preferred Email (all correspondence will be sent to this address)

III - Academic Background

Have you completed: High School Trade Diploma Undergraduate Postgraduate/Professional

VI - Declaration

" I hereby declare that the information provided in this application form, along with the enclosures is valid. I confirm that I will be obliged to follow all the rules and regulations of the CTI, now in force and those to be made enforceable from time to time. I confirm that I will not hold the institution liable, if they choose to expel or cancel my admission on misrepresentation or omission of facts, which could have otherwise affected my admission status. I confirm I have read the terms on each of the pages and will abide by the same and every updated copy. I also accept updated Terms and Conditions on Capital official website www.capital.ac.ae"

Student Signature Parent/Guardian Signature Date

VIII - Items for Submission with the Application Form

- Complete Application Form 1 Passport Sized Photograph
Academic Certificate Copies Application Fee
Complete Resume Passport Copy
Signed Declaration Form

General Terms and Conditions

Admission: The Capital Training Institute DOES NOT DISCRIMINATE ON THE BASIS OF AGE, RACE, RELIGION, COLOR, NATIONAL ORIGIN, SEX, OR DISABILITY IN ITS ACTIVITIES, PROGRAMS, OR EMPLOYMENT PRACTICES. Program specific admission policies are clearly presented on the brochures/ leaflets of the specific programs and have to be met with.

General Refund Policies: Specific program Refund Policies are available on their brochures - the centre general policies are that should a student wish to withdraw from the program, the following procedure needs to be followed:

- 1. The intention must be made in writing to the Student Relations and Admissions Manager/ Centre Manager.
2. Refund of fees (registration fees not included in fees) will be made in the format below:
a. 2 weeks before the start of program 75%
b. On the day of the start of program (before the program) 50%
c. After one class sessions 25%
d. After two class sessions 00%
3. The registration fees are non-refundable and non-transferable unless CTI decides not to run the program
4. In case of proven medical condition supported by MOHs certificate confirming non-attendance of the program by the student, 10% or balance fee will be refunded, whichever is less
5. Processing time for refunds is 15 working days. Classes missed while sessions are being run are counted as classes taken while counting the refunds All refund cases will be treated alike and no exceptions will be made in any case.

Communication Process: The CTI keeps in touch with its students via email. It is the responsibility of the student to make certain that they check their emails regularly. Students are responsible to make certain that they complete all requirements pertinent to the program, assessment, examination and in cases which require them to register for an exam on a certain date. The student must keep the email account provided to the CTI active and if there is a change inform the Student Admissions.

Registration Duration: The offer letter contains the duration of registration for a course. Generally, registration expires in one year.

Attestation of Qualifications: The CTI will guide the Students to the right agency that would provide them professional attestation services of their qualifications. The students will be charged on actual for the service. The CTI will not take responsibility of performing the attestation on the students' behalf.

FOR OFFICIAL USE ONLY

Student ID: Course Code: Documents Received: YES NO Referred By: Enrolled By:

C-Part.....
C-Full.....

Signed: Date: