



STUDENT NUMBER

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PASSPORT PHOTO
OF APPLICANT

(Compulsory- please
attach recent
passport photo of
yourself)

ACADEMIC YEAR APPLIED FOR:

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Closing date for application

21 January 2020

Closing date for late application

18 February 2020

Normal Entry

Grade 10 or Grade 12 School Certificate with a minimum of 18points
ID/Passport Copy
Application Fee (proof of payment)

Mature Age Entry

Grade 10 School Certificate
Your Highest High School Certificate
Other Qualifications
Proof of 2 years working experience (letter from employer)
ID/Passport Copy
Application Fee (proof of payment)

Application Fees (Non-refundable)

The following must be paid at the College when you hand in application or at CVTC Bank Account
(Please attach proof of payment to application form)
Application Fees: N\$200
Late Application Fees: N\$350

Bank Account Details

Clocknet Vocational Training Centre
Standard Bank
Account number: 60002214074
Branch: Ausspanplatz
Branch No: 082-672

Note

The applicants will be required to complete the Application Form, and return it to Clocknet Vocational Training Centre, accompanied by an Application Fee (as stipulated on the Application Form).

Once an applicant fulfills the requirements as stipulated as per the application requirements, the application form will be forwarded for selection
Once a student is selected a letter will be forwarded to the applicant giving permission to sit for the Aptitude Test, which will consist of the following segments:

(a) Section 1: Competency in English; **(b)** Section 2: General Knowledge Competency; **(c)** Section 3: Numerical Competency;

Completed application forms must be mailed to: **Email to:** training@cvtc.com.na

OR

Post to:

Clocknet Technology College
PO Box 40566
Windhoek

Drop the application at:

17 Best Street,
Windhoek West,
Windhoek

SECTION 1: PROPOSED COURSE OF STUDY

First Choice (1) :	
Second Choice (2) :	

SECTION 2: APPLICANT'S PARTICULARS (mark appropriate boxes with an 'X')

Title:	Mr.	<input type="checkbox"/>	Ms.	<input type="checkbox"/>	Other (Specify)		
Surname:							
First Name (s) in full:						Initials	

FOR OFFICIAL USE ONLY:

Accepted for first choice (1)	<input type="checkbox"/>	Accepted for second choice (2)	<input type="checkbox"/>	Incomplete	<input type="checkbox"/>	Rejected	<input type="checkbox"/>
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List 6 of your best subjects including English
(5 best and the 6th should be English)

SECTION 8: FORMAL STATISTICAL INFORMATION

Region of Origin

Karas	200		Omusati	207	
Hardap	201		Oshana	208	
Khomas	202		Ohangwena	209	
Erongo	203		Oshikoto	210	
Omaheke	204		Kavango West	211	
Otjozondjupa	205		Kavango East	213	
Kunene	206		Zambezi	212	

SECTION 9: PAYMENT DETAILS *(this section to be completed by parents/guardian responsible for payments)*

PERSON RESPONSIBLE FOR PAYING THE STUDENT FUNDS.

Father		Mother		Spouse/partner		Guardian	
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Title:	Mr.		Ms.		Other (<i>specify</i>):	
Surname:						
First Name (s) in full:					Initials	:
Home Address:						
P O Box:						
Tel. No. (Home):				Mobile Number:		
E-mail :						
Employer						
Occupation:				Employer's Address:		
Employer's Tell:				Employer's Cell:		

I,hereby declare that all the information furnished by me in SECTION 9 in this form is completed and correct to the best of my knowledge and belief. I further declare that any information found false or incorrect I shall be liable for action taken against me by CVTC.

NB... PLEASE ATTACH A CERTIFIED COPY OF ID FOR PERSON RESPONSIBLE FOR PAYMENTS.

Parent/ Guardian

Signature.....Date.....
.....

Applicant

Signature.....Date.....
.....

FOR OFFICIAL USE ONLY:

APPLICATION RECEIVED BY: _____



RECEIPT NUMBER : _____

Application Form Proof of Submission

Full Name:

Received by:

Date received:
.....
.....

Signature:

