



PIJOYLAW INSTITUTE

We strive to connect our student gifts to GOD plans

179 Canongate, Edinburgh EH8 8BN Tel: 0131 453 2840 Email: Info@pijoylaw.org
Website: www.pijoylaw.org Email: info@pijoylaw.org

APPLICATION FORM

FOR: DIPLOMA – POST GRADUATE DIPLOMA



Photograph

Last Modified: 14 September 2018

PART 1

Nationality : _____

Name of Course : _____

Institute : _____

Commencing from : September_2018 to July 2020

1. Personal Particulars

Name(s): _____

Surname: _____

Sex (tick one): MALE / FEMALE

Marital Status: _____

Date of Birth: _____
Date - Month – Year

Passport No.: _____ Date & Place of Issue: _____
Till: _____

Valid

	Office	Home
Address:		
Tel Nos.		
Mobile/Cell:		
Fax:		
E-mail:		
Special dietary needs, if any:	_____	

Person(s) to be notified in case of Emergency

	Official Contact	Personal / Family Contact
Name:		
Address:		
Tel Nos.		
Mobile/Cell:		
Fax:		
E-mail:		

Educational Qualification(s)

Degree / Diploma / Certificates	Year	Name of Educational Institute
1.		
2.		
3.		

4.			
Professional Qualification(s), if any:			
Professional Qualification(s)	Year	Name of Institute	
1.			
2.			
3.			
4.			
2. Details of Employment/ Profession (current & previous)			
Name of Employer / Department / Company	Position	Period	Description of work
1.			
2.			
3.			
4.			
Are you an employee or Self employed of: (Mark appropriate box)			
a. Government <input type="checkbox"/> b. Self Employed <input type="checkbox"/> c. Others <input type="checkbox"/>			
Details of present employer			
Name _____ / _____		address: _____	
Tel. No. : _____			
E-mail : _____			
3. Have you ever attended a course sponsored in the United Kingdom Before? (Mark one)			
			YES/NO
If answer to 3 is yes, details of the Course _____			
4. Details of Course(s) attended, if any, outside your country			
Country	Course Details & Duration	Year	Sponsor/Programme
5. Please describe in your own words (about 100 words):			
(a) qualification/experience in the related course applied for; and			
(b) reason(s) for applying for this training course			
6. Certification of English language proficiency (as requested by United Kingdom Authority)-If you do not have English Language certificate or learned from English Inclined institution, PIJOYLAW Institute will have to take you through our English Class.			

	Good	Basic	Remarks
Spoken			
Written			
Mother tongue / Native language: _____ / Other language(s), if any: _____			
English Language test administered by(Name of Institution): _____			
Name & Address: _____ _____			
Tel. Number: _____ E-mail: _____			
Signature with Date: _____			

PART – II

**To be completed by the authorized official of the
Institute**

I, _____ on behalf of the
Government of United Kingdom certify that:

I have examined the educational, professional and other certificates quoted by the nominee in Part – I of this form and I am satisfied that they are authentic and relate to the nominee.

The nominee has adequate knowledge of spoken and written English to enable him/her to follow the course of training for which he/she is being nominated.

I nominate Mr./Mrs./Miss _____ on behalf of the Government
of _____/as employer.

Name of Nominating Authority:

Designation:

Address:

Date:

Place:

Signature
(With seal)
Name and Designation
(in block letters)

