

BASIC NUMERACY SHORT COURSE APPLICATION FORM

ciip@ium.edu.na

Title	Mr.	Ms.	Mrs.	Dr.	Prof.	Rev									
							_								
NAME(S):															
SURNAME															
MALE FEMALE															
ID / PASSPORT NUMBER															
CONTACT NUMBER:															
EMAIL ADDRESS															
SIGNATUREDATE															
Cost: Applicati	on Fee: I	N\$140 a	nd Regi	stration	Ba	nk details:							 		
Fee N\$850.00 (Non-Refundable) Course Fee N\$2700.00 Bank name: Bank								Windho	ek						
*Course fee is may be paid in equal instalments Beneficiary Name: IUM-Book Fund															
* All fees must be paid up 4 weeks before the final exams Branch Name: Kudu Branch								ch, Wind	dhoek						
DI Au 1 d	C 11 '	- D			Br	anch code:	4821	72							
1	d Copy of	f ID / Pa			Ac	Account number: 3000338051									
2. Proof of	f paymen	<u>t</u>													
ACKNOWLEDGEMENT OF STUDENT REGISTRATION															

ACKNOWLEDGEMENT OF STUDENT REGISTRATION							
Name(s):	Submission Date:						
Surname:	Course Applied for:						
Received by:							
CONDITIONS:		Office Stamp					
Payment details: PLEASE INDICATE THE NAME OF COUL	· · · · · ·						

Payment: Proof of payments should be emailed to ciip@ium.edu.na with the registration form.

IUM reserves the right to refuse admission where evidence of payment cannot be produced Any cancellation must be received in writing not later than 7 working days prior to the course. Cancellations received less than 7 working days before the course date will be subject to a 30% penalty.