



UNIVERSITY OF TECHNOLOGY, JAMAICA
UTECH ACADEMY
47 HOPE ROAD, KINGSTON 10

APPLICATION FORM – CERTIFICATE COURSE

NOTE: This form should be completed and submitted with:

- APPLICATION FEE – \$1000.00 (non-refundable)

Name of Course:

Name (in full) Mr. / Ms. / Mrs.:

Mailing Address:

E-mail Address:

Telephone No.

Home: _____

Work: _____

Present Employer:

For Official Use Only

I.D. No.

Course Code: _____

Application Fee: \$ _____

Course Fee: \$ _____

Date Rec'd: _____

Recommendation:

Address:

Present Position (Title):

Immediate Supervisor (Name):

Position / Title:

Date of employment: from _____ to

Description of Duties:

PAYMENT OF FEES:

Applicants **must** sign the following undertaking:

I undertake to make payment of all fees if I am admitted to this course.

State source(s) from which you expect to derive financial support:

SELF SPONSORSHIP OTHER

If sponsored, state name and address of sponsor

Sponsor's name:

Address:

Authorizing Signature:

Date: _____

EDUCATION

College, University, Secondary School attended and dates

What do you hope to gain through this training?

Give the names of two references one of whom should preferably be from your workplace.

PREVIOUS EXPERIENCE	
Year: _____	_____
Position: _____	_____
Organization: _____	_____
-	_____
_____	_____
Year: _____	_____
Position: _____	_____
Organization: _____	_____

Applicant's Signature: _____

Date: _____

“UTECH ACADEMY reserves the right to cancel any course that is undersubscribed,” also “Fees are subject to change without notice.”