

Professional Courses Application Form

		Student Advisor:	
	Student No:	Semester Applied for	
STUDENT DETAILS			
First Name	Phone No.		
Middle Name	Employer		
Surname	Postal Address		
Home Address			
	Email		
Date of Birth	Sex		
Place of Birth	Religion		
Country	I.D/NRC/Passport No.		
Citizenship	Marital Status		
DETAILS OF EDUCATIONAL HISTORY			
Last school attended	Subjects Passed		
Address	and Grade		
Country			
Educational Level/Grade			
COURSE APPLIED FOR			
1			
1.			
2.			
3.			
METHOD OF PAYMENT			
Monthly Instalments \$	in words		
Current Fees (Refer to Fees Schedule) \$	in words		
Cash Debit Order	Visa Card	Transfer	
BANKING DETAILS (For Debit Order Only) Account Name:			
Name of Bank:			
Account Number:			
Branch:			
(RIME). I hereby certify that the information I have submitted is correct and this application be accepted, the contract between me and RIME be strength deductions from mysalary or bank account due in respect of myself only. I payments on its debit order system as may be required. I understand the manifest errors) and that once my cancellation is effected (giving 60 daily reserves the right to deduct fees for provided service that is still owed (sauthority to RIME to convert the amount to be debited in compliance with TO BE COMPLETED BY EITHER STUDENT OR GUARANTOR	rictly governed by the terms and cond I the undersigned, authorise RIME to a that all fees paid prior to the date the lys' notice for breach), I will cease to b such as but not limited to books, stud	thing affecting the proposed applications as amended from time to burrange with my employer / bank to cancellation is effected are non-see a CIRSM student . I also understay packs and written examinations	cation.lagreethatshould cime by RIME.lauthorise osetup the facility for fees refundable (exclusive of
Applicant/Guarantor's signature	Date		
		_Fo	r Official Use Only

STUDENT CONTRACT FORM

Enrolment processed by:

Intake:

Date:

Date Captured by:

Date:

Date: