



SKILLS FOR EMPLOYMENT SUMMER PROGRAMME

Registration Form

Select your course by placing a tick to the left of the one for which you will be registering:

- | | |
|---|--|
| <input type="checkbox"/> Personal Fitness Trainer | <input type="checkbox"/> Start Your Online Business |
| <input type="checkbox"/> Horticulture (Landscape Maintenance) | <input type="checkbox"/> Call Center Skills |
| <input type="checkbox"/> Event Planning | <input type="checkbox"/> Applied Customer Service |
| <input type="checkbox"/> Make-up Artistry | <input type="checkbox"/> Food Safety: Science and Practice |
| <input type="checkbox"/> Computer Technician | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Phone Repair Technician | |

Name of Participant: _____ Date of Birth: ____/____/____

Address: _____

Email Address: _____

Telephone: _____ Mobile: _____

Education: 5th Form Lower 6th Upper 6th Tertiary Other

Name of Last School Attended: _____

Signature of Participant _____ Date _____

NOTE: Before signing this document, please review enrolment and cancellation policies at <http://captech.edu.jm/apply.php>

Banking Information: Account name: Caribbean Polytechnic Institute; 22 B Old Hope Road, Kingston 5, Jamaica, W.I.; Account number 5502646712 held at the Sagicor Bank, Constant Spring Road Branch, Jamaica
Only cash payments or Bank Drafts are accepted.

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For Office Use Only

Registration Fee: J\$2,500.00 Paid Date: