

ENROLMENT FORM

Application No :

COURSE PREFERENCE (✓)

- CPL/IR with Frozen ATPL Abridge Course Assistant Flight Instructor (AFI)

1. PLEASE COMPLETE YOUR PERSONAL DETAILS IN CAPITAL LETTERS

- Mr. Mrs Ms. Others (Please specify:e.g. Dr, Dato', etc.)

FULL NAME (as in NRIC/ Passport) :

NRIC/PASSPORT/ID NO : DATE OF BIRTH : ^D...../^M...../^Y.....

NATIONALITY : OCCUPATION :

VISA EXP. DATE : ^D...../^M...../^Y..... E-MAIL :

PERMANENT ADDRESS :

CONTACT NO (HP) : CONTACT NO (HOME) :

CORRESPONDENCE ADDRESS :
(if different from the above)

PARENT / GUARDIAN NAME :

CONTACT NO (HP) : CONTACT NO (HOME) :

2. EDUCATION LEVEL

- SPM DIPLOMA/DEGREE GCE O LEVEL OR EQUIVALENT

3. SPONSOR PARTICULAR

A "Sponsor" refers to the person who will be fully responsible for the payment of the Course Fee and other fees, cost and/or expenses of the applicant during the Course.

- Own Airline Sponsor Financial Institution Others (Please specify)

NAME OF SPONSOR :

NRIC / COMPANY NO : OCCUPATION :

RELATIONSHIP TO APPLICANT : CONTACT PERSON :
(for company Sponsor)

ADDRESS : OFFICE TEL NO :

..... MOBILE TEL NO :

..... FAX NO :

..... E-MAIL :

.....
CADET'S SIGNATURE

.....
DATE