Bahamas Technical and Vocational Institute

Admissions Office ▪ Old Trail Road ▪ P.O. Box N-4934 ▪ Nassau, Bahamas ▪ 502-6338

Application for Professional Development and Home Improvement Courses

Please type or print legibly in blue or black ink and return to the Admissions Office. Proof of citizenship and a copy of National Insurance card must be submitted along with the completed application. Non- Bahamians will require a Permit.

Term: FALL ( ) SPRING ( ) SUMMER ( ) YEAR _____

NAME: _____

COUNTRY OF CITIZENSHIP: _____

SEX: MALE ( ) FEMALE ( ) DATE OF BIRTH: _____
MM/DD/YY

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

TELEPHONE NO: (HM) _____ OTHER _____

EMERGENCY CONTACT NAME AND NUMBER: _____

COURSE TITLE: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

FOR OFFICIAL USE ONLY		
STUDENT NO:_____	**DATE:_____**	**ADMISSIONS REP:_____**
COURSE FEES: $_____	**AMOUNT PAID: $_____**	**BALANCE: $_____**
	RECIEPT NO:_____	**ACCOUNTS REP:_____**