

Form No. _____

VISSION MARINE SERVICES

APPLICATION -FORM



Affix your recent
Passport size
Photograph
here

About You

Name _____

Father's Name _____

Sex (Please tick) : Male _____ Female _____ Date of Birth /dd/ mm/ yy ____ / ____ / ____

Height _____ Weight _____

Permanent Address _____

Current Address _____

Home Telephone (Please include all codes) _____

Contact Telephone No. (Please include all codes) _____

E-mail Address: _____

Contact E-mail Address: _____

State of Birth _____

Nationality _____

About Your Education

School/College/University/Other, 3rd Level Institutions (Starting with most recent First)
Please include copies of all transcripts and certificate when submitting application form

Name of College/ University/Institute	Year Left	course of Study taken	Overall Result
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References:

Please include 2 reference letters from 2 references. If you are a graduate please include at least one academic reference. If your application relies on your work experience please include at least one employment reference/

Name : _____

Name : _____

Title _____

Address _____

Contact Telephone No. _____

Contact Telephone No. _____

How did you hear about V.M.S.

(1) Friend _____ (2) Family _____ (3) Education Fair _____
(4) Magazine / Newspaper _____ (5) Current School/College _____

Checklist

For undergraduate applicants please attach all relevant supporting documents

- Personal Statement
- Copies of Senior High School Mark Sheet
- Copies of Last Qualification certificate
- Copies of English Language Certificates (if available)

Declaration

I confirm that the information given by me is true to the best of my knowledge. I have not given any material information that could effect my application / selection. I understood that board of VMS will not be liable to compensate me in any way. I have read and understood contents of after VMS selection and joining the if I withdraw for any reason no money will be refunded.

Sign of Applicant _____ Date _____

VMS
VISSION MARINE SERVICES

For VMS

Course _____

Point of Entry _____

Decision _____

Signature: _____

Date: _____

