

Advanced Professional Certificate Courses



APPLICATION FOR ADMISSION

QualitQualitAppar								
1. NAME :	A. PE	RSONAL DATA		FATHER'S	S NAME:			
	Ms.							
2. COMPANY:								
3. ADDRESS (Of								
-	esidence):			T = ~				
4. DATE OF BIR	RTH (Day/N	Month/ Year):		5. N.I.C. NU				
6. CELL:				7. WORK PHONE:				
8. FAX:				9. E-MAIL:				
	R ED	UCATION (Attach y	our creder	ntials with	the application)			
10. DEGREE	11. COLLEGE OR UNIVERISTY (Name City/Country)		12. DATES ATTENDI				14. GRADE /	
			FROM (Year)	TO (Year)			DIVISION	
	C. SU	MMARY OF PROFI						
15. POSITION		16. EMPLOYER	17. START DATE (Month/Year)		18. FINISH DATE (Month/Year)	19. YEARS IN POSITION		
					MOMAL VIEW DO			
					TOTAL YEARS			
	D. TE	CHNICAL TRAINI	NGS / COU	JRSES				

		22. DURATION	23. DATES ATTENDED	
20. DESCRIPTION OF TRAININGS/COURSES	21. INSTITUTE		FROM (Month/Year)	TO (Month/Year)

E. PROFESSIONAL MEMBERSHIPS

24. TYPE OF MEMBERSHIP	25. PROFESS	SIONAL BODY	26. MEMBER SINCE						
F. EMPLOYER'S APPROVAL (in case the candidate is an employee)									
 I certify that the information provided by the candidate is accurate to the best of my knowledge. I have no objection whatsoever on the candidate's admission and participation in the course. The course fee will be paid by The Candidate 									
EMPLOYER'S STAMP & SIGNATURE	-	NAME	DATE						
G. CANDIDATE'S VALIDATION									
I certify that the statements above including my attachments are accurate to the best of my knowledge. I hereby authorize the institute to verify any information submitted I understand that any falsification of any information in this application or attachment may cause for rejection or withdrawal of certification.									
I further agree to hold the NTU & PIQC harmless from any additional liability in the event this application is rejected on the basis of information furnished to NTU & PIQC by me or third person which would make me ineligible.									
I further agree to adhere to the NTU & PIQC's Code of Professional Conduct and, if I am certified, to meet the requirements of continuous certification.									
APPLICANT'S SIGNATURE	DATE								
DOCUMENTS TO BE ATTACHED (Please ensure that the following documents have been attached and tick appropriately) 1. Application Fee (Rs. 2,000) Non – Refundable 2. Passport Size Photographs (Three) 3. Academic Certificate(s) / Provisional Certificate(s) – Photocopies 4. Certificate(s) of training Courses – Photocopies 5. Bio-data / Resume									
PIQC USE ONLY									
CHECK POINTS PERSONAL INFORMATION COMPAN	NY INFORMATION	REFERENCE DOCUMI	ENTS FEES PAID						
CHECKED BY:	VI IIVI ORUMIIIOIV	DATE:	SIVIS TIBESTIME						
(SIGNATURE)									

PIOC Institute of Quality

REVIEW AND APPROVAL

REVIEW / APPROVER:

Karachi Office: C-35 Block 10-A Gulshan-e-Iqbal, Karachi

Tel: 34177279

Cell: 0315-0027826, 0333-2163620

Email: ikram@piqc.edu.pk, piqc@cyber.net.pk

(SIGNATURE)

www.piqc.edu.pk

National Textile University, Karachi Campus

Address: St-2/1, Sector 30, Korangi Industrial Area, Karachi,

74900, Pakistan Tel: 021-99333896

DATE:

Email: muhammadfahad@ntu.edu.pk

THE APPLICATION HAS BEEN REJECTED

Website: www.ntu.edu.pk/kc