## **MAHATMA GANDHI INSTITUTE**

## **APPLICATION FORM**

## **DIPLOMA PROGRAMME OF STUDIES (FULL - TIME)**

## **Intake 2025**

	Subject:	• • • • • • • • • • • • • • • • • • • •		Mature Candidate*  (*Tick as appropriate)
1.	Surname (Block	Letters) Dr/M	r/Mrs/Miss	
	Other names (B)	lock Letters)		
	Maiden name (it			
2.	Address for corre	espondence	Teleph	one No. (Home):
				(Office):
				(Mobile):
			F	ax No.:
			E	-mail:
_		*	Tick as appropriat	re (🗸)
3.	Date of birth	4.* Sex	5.*Marital Status	6.* Nationality
AC	ay   Month   Year	Male Female	Married Single	Mauritian Other  If not Mauritian, specify  National ID No.
4.	Occupation		Place of	Work:
			Address:	

5.	Academic	Oua	lificat	tions
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SC/GCE O-Level Results	Grades (e.g. 1, 2, 3 or A, B,C)			HSC/GCE A-Level Results	Grades (e.g. A, B, C)		
	Yr	Yr	Yr		Yr	Yr	Yr
Subjects	1st Attempt	2nd Attempt	3rd Attempt	Subjects	1st Attempt	2nd Attempt	3rd Attempt
				Subjects Taken at Subsidiary Level	Grade	es (e.g. 1, 2	, 3)
. Other qualification	ons (state y	ear, exam	ining boo	ly & results)			

			Subjects Taken at Subsidiary Level	Grade	es (e.g. 1, 2, 3	)
. Other quali	ifications (state	year, examining bo	dy & results)			
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Institution		Course ll-time or part-time)	Year started	Year	in which cours be completed	
MGI		,				
Other institutions						
Omer monumons	8					
8. I certify tha  Date  N.B. (1) Applic	at the above info		Signat		pplicant	
8. I certify tha  Date  N.B. (1) Applic	at the above info	wed to register for <u>o</u> nd educational certi	Signat <u>only one</u> subject.  ificates must be subi			
8. I certify tha  Date  N.B. (1) Applic	at the above info	wed to register for <u>o</u> nd educational certi rm.	Signat <u>only one</u> subject.  ificates must be subi	nitted ald	ong 	