



Please attach two  
copies of your  
recent passport-  
size photograph

## APPLICATION FOR SIX-WEEK CERTIFICATE COURSE

# Accounting for Non-Accountants (AFNA)

1. Name (in BLOCK letters):

2. Date of Birth:     
dd mm yyyy

4. Gender:  Male  Female

5. Phone#

6. E-mail:

7. Present Address:

8. Give details of your current and most recent (if applicable) full-time employments:

Employment	Position	Organization	Duration (From-To)
Current			
Most Recent			

9. Total years of job experience:

10. Give details of your most recent academic degree obtained:

Level	Degree	Institution	Year Awarded	Area / Major	Class / CGPA
Masters (if obtained)					
Bachelors					

11. Have you ever been enrolled in any degree/course at IBA?  Yes  No

If yes, please specify:

Degree/Course	Year Attended

### Declaration

I have read the course brochure(s) and I agree to abide by the requirements of the course(s). The information provided in this application form is true and correct.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date