

6. Terms and Conditions

- 6.1 Course fees paid are not refundable under any circumstances.
- 6.2 Course fee may be transferred, under special circumstances, from one course to another in favour of the same student.
- 6.3 The Management reserves the right to alter the time table at any time after the commencement of the course.
- 6.4 Students must be abide by the Student Charter, regulations, rules and dress code of IPA UK.
- 6.5 Student exam admission and/or results may be withheld for non-payment of the course fee Instalment on due date.
- 6.6 The qualification can only be awarded after all assessment requirements have been met and all fees have been paid to IPA UK

I confirm that the information given in this form is correct and complete. I have read and understood the terms and conditions and agreed to abide by the terms and conditions set out above, which I accept as conditions of this application.

Signature of the Applicant

7. Representative / Approved Centre Details :

| | |
|-------------------------------|--|
| Name of the Institution : | |
| Website of the Institution : | |
| E - Mail of the institution : | |
| Country of the Institution : | |

PART TWO

I. PERSONAL STATEMENT

(Briefly in bullet form is ok. Those who want to be more comprehensive are free to do it in a separate sheet and attach)

| | |
|---|--|
| Reasons for selecting the course | |
| Special Interests | |
| Career Aspirations | |
| Any other relevant information <i>(You may also mention here if you have any disability - congenital or otherwise)</i> | |

2. WHO WILL BE PAYING YOUR TUITION FEE?

Self Parents Other (Specify) _____

| | | | |
|---------------------|------------|---------|---------|
| Name: | Mr. / Mrs. | | |
| Address: Residence: | | | |
| Official: | | | |
| Occupation: | | | |
| Contact No: | Residence: | Office: | Mobile: |
| E-mail: | | | |

Please indicate how you heard of the course you are applying for

| | |
|---|--|
| <input type="checkbox"/> Word of Mouth / Past Student of IPA UK | <input type="checkbox"/> Our Website / Email |
| <input type="checkbox"/> Newspaper / Magazine Advert | <input type="checkbox"/> Seminars |
| <input type="checkbox"/> Prospectus / Leaflets | <input type="checkbox"/> Open Events |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Facebook |
| <input type="checkbox"/> TV | <input type="checkbox"/> Agent (Name _____) |

APPLICANT'S CHECKLIST

Have you included?

- Passport size colour photos
- Proof of your qualifications (Certified copies with originals. Original will be returned after verification)
- A Copy of your Birth Certificate
- A Copy of your National Identity Card
- Any other relevant documents

DECLARATION - 1

I understand that the course I have chosen is provided strictly in accordance with the approval given by the relevant qualification awarding body. My qualification will thus be awarded direct upon my achieving the minimum academic benchmark set by the awarding body. I have been made aware that it is my responsibility to confirm the approval and recognition of the qualification by any other relevant local or international professional bodies. I am further aware that any changes that may occur in the future pertaining to the approval / recognition of the qualification would be beyond the control of IPA UK and hence it cannot be held responsible for such changes.

DECLARATION - 2

By signaling this form, I confirm that to the best of my knowledge, the information given in this form is correct and accurate. Further, I agree to abide by the rules and regulations of the college. If any information given here is found to be false, I am aware my application will be cancelled / admission will be quashed and I shall have no claim whatsoever from the college. I also understand no refund or batch transfer will be effected after ten days from the start date of the course.

Signature

Date

OFFICE USE

| | |
|--|---|
| Date Application received | |
| Admission to course: | <input type="checkbox"/> Approved <input type="checkbox"/> Rejected |
| Student Number: | |
| Check List | Signature on the form: <input type="checkbox"/> Proof of Qualifications: <input type="checkbox"/> |
| Total Course Fee: | |
| Registration Fee : | |
| Course Fee : | |
| Amount Paid Upfront: | |
| Number of Instalments for the balance to be settled: | |
| Payment Discount | |

Admission Officer

Date

Remarks

Main Admissions : Office Golden Cross House, 8 Duncannon St, London, WC2N 4JF, United Kingdom.

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