

CENTRE FOR DISTANCE AND FLEXIBLE LEARNING

APPLICATION FORM FOR ADMISSION

(Please carefully read and understand the given instructions below before completing each part of the form).

- 1. You must FILL in this APPLICATION FORM before you can be considered to do the course(s).
- 2. Each part of the Form must be completed an incomplete APPLICATION FORM will not be considered
- 3. The APPLICATION FORM MUST BE ATTACHED WITH THE FOLLOWING DOCUMENTS:
 - Certified Copies of your CERTIFICATES
 - Certified Copies of your ACADEMIC TRANSCRIPTS or RESULTS;

(NOTE: Any Application Form received WITHOUT the above documents will not be considered!)

- 4. The COMPLETED Application Form must be agreed to and signed by the Applicant.
- Send the COMPLETED Application Form to: Centre for Distance and Flexible Learning (CDFL), Solomon Islands National University, P.O. Box R113. Honiara.
- 6. APPLICATION OPENS THROUGHOUT THE YEAR.
- 7. YOU WILL BE NOTIFIED OF YOUR ACCEPTANCE BY RADIO OR ACCEPTANCE LISTS THROUGHOUT THE APPLICATION PERIOD.

NOTE: Application Forms are available and can be collected from the following Centers and Sub centers:

- a. Buala Campus, Buala, Isabel Province
- b. Gizo Community High School, Gizo, Western Province
- c. Honiara Center, Lower Panatina Campus
- d. Kirakira Education Office Kirakira, Makira/Ulawa Province.
- e. Lata Education Office, Lata, Temotu Province
- f. Lomlom, Reef Islands, Temotu Province
- g. Malu'u Community High School, Malu'u, Malaita Province
- h. Noro Community High School, Western Province
- i. SR Academy, Marovo Lagoon, Western Province
- j. Taro Education Office, Taro, Choiseul Province

Or can be **downloaded** from the Solomon Islands National University WEBSITE: <u>www.sinu.edu.sb</u>

FOR MORE ENQUIRIES PLEASE CONTACT - TELEPHONE: (677) 42629/42600 or Email: <u>dflhelpdesk@sinu.edu.sb</u>

(STUDENT DETAIL REGISTRATION)

Please PRINT CLEARLY the information required!

SECTION A: PERSONAL DETAILS

FIRST NAME		MIDD	MIDDLE NAME		SURNAME				
DATE OF BIRTH				GENDER		MARITAL STATUS			
DAY	MONTH	YEAR	(Please	(Please Circle		(Please circle)			
			Male	Female	Single	Married	Divorced	Widow	
WARD NAME/NUMBER CO			CONSTITUENCY:		PROVINCE:				

CONTACT DETAILS

TELEPHONE:	Mobile:	Email Address:		
Residential Adress (Town)	Home Address (Village)	Parents' Work Address		

SECTION B: EDUCATIONAL BACKGROUND

Secondary School/Tertiary Details:

HIGHEST FORM/PROGRAM COMPETED	SCHOO/INSTITUTION	YEAR	AWARD ATTAINED

SECTION C: PROGRAM APPLYING FOR (PLEASE TICK)

1.	1. University Preparatory Certificate 1				
2.	2. University Preparatory Certificate 2				
3.	3. University Preparatory Certificate 3				
4.	HIGHER QUALIFICATION PROGRAMS (HQ) – tick your choice from the list below				
	a. Certificate in Tropical Agriculture [CTA]				
	b. Certificate in Business Entrepreneurship [CBE]				
	c. Certificate in Physics & Mathematics				
	d. Certificate in Chemistry & Physics				
	e. Certificate in Biology & Chemistry				

Please tick which semester/trimester you want to enroll in:

PROGRAM	SEMESTER	
University Preparatory Certificate 1	Semester 1	Semester 2
University Preparatory Certificate 2	Semester 1	Semester 2
University Preparatory Certificate 3	Semester 1	Semester 2
HIGHER QUALIFICATION	Semester 1	Semester 2

SECTION D: DECLARATION

STUDENT DECLARATION:	SIGNATURE:
I Certify that the information provided in the application is	
true and accurate and I agree to abide by the conditions and	DATE:
expectation of SINU-CDFL and to keep up with fee payments	