



JSS ACADEMY (MAURITIUS)

Avenue Droopnath Ramphul, Bonne Terre, Vacoas, Mauritius

Phone: +230 401 6415

Fax: +230 427 0334

Email: info@jssacademy.mu

APPLICATION NO.					

APPLICATION FOR ADMISSION: ACADEMIC YEAR 20...../20....

1. SURNAME:

OTHER NAMES (Mr/Mrs/Miss):

Maiden Name (If applicable):

(Enclose photocopy of Marriage Certificate)

2. Date of Birth			3. Gender		4. Marital Status		5. Nationality		Mauritius National ID No.
DD	MM	YR	M	F	Married	Single	Mauritian	Others (Please Specify)	
									If not Mauritian
									Passport No.:

6. ADDRESS FOR CORRESPONDENCE

CONTACT DETAILS

Tel (M): _____

Tel (H): _____

Office: _____

7. EMAIL:

8. DETAILS OF NEXT OF KIN/RESPONSIBLE PARTY

NAME: _____

Tel: _____

Relationship with student: _____

9. COURSE APPLIED FOR (In order of preference)

Sn	Course Title	Full-Time	Part-Time
1			
2			
3			

10. QUALIFICATIONS

Details of Secondary School (s) Attended

Sn	College	Start		End	
		MM	YY	MM	YY
1					
2					

(i) School Certificate (SC) / GCE 'O' Level

Sn	Subjects	Grades
1		
2		
3		
4		
5		
6		
7		
8		
9		

(ii) Higher School Certificate (HSC)/GCE 'A' Level

ADVANCED LEVEL		
Sn	Subjects	Grades
1		
2		
3		
4		
SUBSIDIARY LEVEL		
1		
2		
3		
4		

(iii) Other Qualifications / Post-Secondary Education

Sn	Course/Programmes	Institutions Attended	Grade Awarded	Duration	From (Year)	To (Year)

11. EMPLOYMENT RECORDS

8.1 Give all relevant information about previous and current employment, if applicable

From		To		Name & Address of Employers (Previous and Present)	Positions Held	Job Description
MM	YR	MM	YR			

11.2 This sub-section should be filled in if the applicant is sponsored by his/her Employer.

Employer's Name: _____ **Contact Details:** _____

Note: A sponsored applicant is one who will be released to attend courses and payments will be done by the Employer.

8.3 DECLARATION OF EMPLOYER (If applicable)

I / We hereby agree to Mr/Mrs/Miss _____ will follow the course of _____ at JSS Academy, Mauritius, and I / We undertake to release him/her to follow the said programme if he / she is selected.

Signature: _____ Date: _____

Position: _____

12. DECLARATION OF APPLICANT

I, _____, solemnly declare that if admitted to JSS Academy, Mauritius, I will:

- (i) Diligently follow the programme of study for which I am selected to until its completion;
- (ii) Inform the Management, in writing and without delay, if I withdraw from the programme;
- (iii) Conform to all the rules and regulations of JSS Academy, Mauritius;
- (iv) Pay in advance all fees and dues required until the completion of my studies;
- (v) Incur the cost of recovering any additional outstanding balance due to JSS Academy, Mauritius
- (vi) Inform the institution if I am suffering from any illness or incapacity.

I acknowledge that JSS Academy, Mauritius, reserves the right to seek information from relevant bodies as to the standing of my claimed qualifications and to reserve any decision regarding the admission made on the basis of incorrect or incomplete information.

I declare that the above information is true and correct.

Date: _____ Applicant's Signature: _____

Note: JSS Academy, Mauritius, reserves the right not to run the above programmes.

Please return the completed Application form together with originals and photocopies of supporting documents and payment.

FOR OFFICE USE ONLY

Application Received on: _____

Programme Admitted to: _____

Note:

Signature of Admin Assistant

Date

Signature of Academic Coordinator

Date

Fees Paid:

Details of Fees	Amount Paid	Receipt No	Date	Signature (Accounts Dept)
Registration Fees (Non-Refundable)				
Administrative Fees (Non-Refundable)				
Laboratory Fees (Non-Refundable)				
Tuition Fees:				

Notes:

Payment can be effected in cash or by cheque (to the order of JSS Academy Mauritius) at the cash counter of JSS Academy or through bank transfer on the following account:

Name of Bank: Bank of Baroda Branch: Port Louis
Account No.: 90310200004434 Swift Code: BARBMUMU
IBAN: MU51BARB0231000200004434000MUR