

Tel +268 41111/5056132
Fax + 4040381/5056132
e-mail: acp_training@yahoo.com
website:www.avb.co.sz



**AFRICA, CARIBBEAN AND
PACIFIC INSTITUTE FOR
MANAGEMENT**

P.O.Box 482
Mbabane.
Kingdom of Swaziland
Southern Africa

APPLICATION FORM

Please Complete in Block letters and Tick Appropriate Items

Date: _____

Course Title: _____

Course Date: _____

Surname: _____

First Name: _____

Position: _____

Qualification: Certificate ____ Diploma ____ BSc. ____ MSc. ____ Ph.D. ____

Organization: _____

Postal Address: _____

Country: _____

Telephone: _____ Fax: _____

E-mail: _____

SF _ I have secured funding for this Course
SSF _ I am still searching for funding for this Course
(Please note that ACP Institute for Management is not a grant aiding agency)

Signed by Applicant: _____ Approved by Authority: _____
Signed

Date: _____

Office Stamp: _____

Name: _____

Position: _____

Telephone: _____

Fax: _____

Date: _____

Return Completed Application to:
Executive Director
ACP Institute for Management