



**LEGAL
ENGLISH**
for professionals

PASSPORT
SIZE
PHOTO

Application Form

Please complete the form in BLOCK CAPITALS.

_____ الاسم الكامل (باللغة العربية)

Full Name (Same as passport): _____

Postal Address : P.O. Box: _____ P.C : _____

Location Address: Blg No.: _____ Flat No.: _____ Way No.: _____ City: _____

Date of Birth: _____ ID/ Residence Card No.: _____

Telephone No. (Day-time): _____ Mobile No: _____

E-mail: _____

Please tick the package you are intending to apply for?

Package 1 : (Course - 1, Course - 2, Course - 3)

Package 2 : (Course - 2, Course - 3)

Package 3 : (Course - 3)

Education Level : Secondary Graduate Post-Graduate

Education Qualification : _____

What is your current employment position? (if applicable) _____

Employment Name: _____

Employment Address : _____

_____ Telephone Number: _____

It would be very helpful to us if you could indicate how you heard about the program/ SLTC:

Newspaper

E-mailer

Social Media

Friends

Others

FOR OFFICIAL USE ONLY

Application No.

Entrance Test Date