



AMERICAN COLLEGE OF HIGHER EDUCATION

DEHIWALA : 23, Hospital Road, Dehiwala.
KANDY : 502, Peradeniya Road, Kandy.
GALLE : 286B, Wakwella Road, Galle.
NEGOMBO : 194, St. Joseph's Street, Negombo
MATARA : 33/3, Anagarika Dharmapala Mw, Matara
KURUNEGALA : 401, Wehara Junction, Kurunegala.

Tel: (011) 2712216 Fax: (94-11) 2737126
 Tel: (081) 4474527 Fax: (94-81) 4474527
 Tel: (091) 5454532 Fax: (94-91) 5454532
 Tel: (031) 2226600 Fax: (94-31) 2226600
 Tel: (041) 2222778 Fax: (94-41) 2222778
 Tel: (037) 5625551 Fax: (94-37) 2220735

APPLICATION FORM

PART I

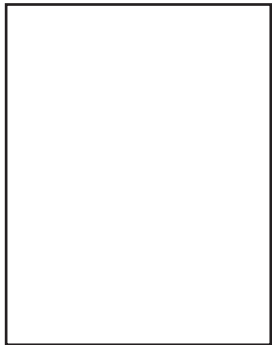
Please read the instructions below prior to filling this form

CHECKLIST OF DOCUMENTS TO BE SUBMITTED AT REGISTRATION

- 3 Color Photographs Copy of NIC or Passport Copy of Birth Certificate Curriculum Vitae
 Academic certificates Transcripts

POLICIES / TERMS & CONDITIONS

- Enclose the applicable non-refundable application fee and total course fee with the form. Applications cannot be considered unless it is accompanied with the above fee. Cheques to be made Payable to the "AMERICAN COLLEGE OF HIGHER EDUCATION".
- No refunds or transfer will be given whatsoever on any computer courses.
- Please note that non-attendance at classes is not an indication of cancellation. Cancellation **MUST** be informed in writing.
- Request for cancellation must be made in writing and received at Registrar's Office at least 03 working days prior to the starting date of the course. Full refund of the course fee, books/material fee will be made. However, application fee is non-refundable.
- No refunds will be given on any cancellations made after the course commences.
- Students may transfer only 75% of their course fee to another course conducted at ACHE (if cancellation is made within 14 days of the commencement date of their first course)



DECLARATION:

I agree to abide by the policies, terms and conditions of the American College of Higher Education.

.....
Signature of Applicant

.....
Date

PART II

PERSONAL INFORMATION

Complete all items in this section which apply to you in BLOCK CAPITAL. Do not omit any portion of the required information. Accuracy and completeness will avoid delay of admission to the College.

1) Name in full:

2) Name as it should appear in the certificate:

3) Gender:

Male Female

4) Date of Birth:

5) Place of Birth:

6) Marital Status:

Single Married

7) Occupation:

8) Country of Citizenship:

9) Passport / NIC No:

10) Contact No:

11) Permanent Address:

12) Mailing Address: (if different from above to which all correspondence should be sent)

13) Email Address:

14) a) Name of Father/Legal Guadian/Spouse:

b) Home Address:

c) Emergency Contact Numbers: Res:

Office:

d) Occupation:

e) Work place:

(Name & Address)

15) a) Name of Mother:

b) Home Address: (if different from 14b)

c) Emergency Contact Numbers: Res: Office: d) Occupation:

e) Work place: (Name & Address)

EDUCATIONAL QUALIFICATIONS:

O/L's	Year:		A/L's	Year:	
School:			School:		
Subject		Grade	Subject		Grade

ACADEMIC/PROFESSIONAL QUALIFICATIONS:

Qualification	Institution	Year	Other Details

WORK EXPERIENCE: (BRIEFLY DESCRIBE)

HOW DID YOU FIND ABOUT AMERICAN COLLEGE OF HIGHER EDUCATION? WHICH ONE?

Email campaign
 TV
 Talk show
 SMS campaign
 Newspaper advertisement
 Exhibition
 Facebook
 Leaflet / handbill / flyer
 Other

PROGRAM APPLIED FOR:

DECLARATION:

I certify the information furnished by me is true and correct. If I am found to have given false information, the offer may be withdrawn.

.....
Signature of Applicant

.....
Date

OFFICE USE ONLY

Student ID: Comments:

.....

Authorized by: