

AVIATION APPLICATION FORM

WHERE DID YOU HEAR ABOUT OUR COURSES?

Internet Facebook Friends Former student Other

CHECK THE PROGRAM OF YOUR CHOICE

- | | |
|--|---|
| <input type="checkbox"/> Diploma Foundation in Travel & Tourism | <input type="checkbox"/> Turnaround Coordinator |
| <input type="checkbox"/> Airline Cabin Crew Training | <input type="checkbox"/> IATA – Harvard Diploma in Travel & Tourism |
| <input type="checkbox"/> Customer Service (Check-in Agent + Altéa) | <input type="checkbox"/> IATA – Harvard Diploma in Aviation |

CONTACT INFORMATION

Full Name : Date of Birth (dd/mm/yyyy) :
 Gender (M/F) : Nationality :
 Address :
 E-mail : Mobile :

LANGUAGE SKILLS

English	
Maltese	
Spanish	
Italian	
Others	

- 6 = Native language
 5 = Excellent (fluent)
 4 = Good (can handle conversation with confidence)
 3 = Average (can handle elementary situations)
 2 = Poor (understands but does not speak so well)
 1 = Basic skills (can handle simple questions and phrases)

PAYMENT

Payment Method: Card Cash Cheque On-line

Date:

Camas receipt confirmation:

DECLARATION

I, Mr/Mrs/Ms, declare that to the best of my knowledge, the answers to the questions in this application are correct and I understand that if any false information is given, or any material fact suppressed, I may not be accepted for the course, or I may be dismissed.

Date : Signature :