



TRINIDAD AND TOBAGO HOSPITALITY & TOURISM INSTITUTE

(Trinidad Campus)

P.O.Box 41, Carenage, Trinidad, W.I

Phone: (868) 634-1315/4250/4456/2144/2146

Fax: 634-1314/2145

Website: www.hospitality.tt.com

E-mail: marketing@tourismcareerstnt.com

APPLICATION FORM SHORT COURSES

1. NAME _____
SURNAME: FIRST NAME MIDDLE NAME
2. ADDRESS: _____ 3. TELEPHONE NO: _____
 _____ 4. E-mail _____
5. DATE OF BIRTH ____/____/____ 6. AGE: ____ 7. SEX: MALE ?
DY MTH YR FEMALE ?
8. ID NO. /PASSPORT NO. / OTHER (PLEASE SPECIFY) _____
9. MARITAL STATUS: _____ 10. NATIONALITY: _____
11. RELIGION: _____
12. PROGRAMME _____
13. NAME OF PARENT/GUARDIAN/SPOUSE/NEXT OF KIN _____
14. IN CASE OF EMERGENCY PLEASE NOTIFY: _____
15. RELATIONSHIP: _____ 16. TELEPHONE: _____

17. EMPLOYMENT (Include Current or Last Employer)	POSITION	FROM (Yr)	TO (Yr)

18. Course(s) previously taken at this Institute: _____ Year: _____
19. Course(s) successfully completed at any other institution of higher learning: _____ Year: _____

20. PLEASE LIST HOBBIES/ SKILLS/ & AFFILIATIONS: _____
21. PLEASE SPECIFY (IF ANY) DISABILITY/ OR ON ANY MEDICATION: _____

I hereby certify that the above information is true and correct

22. SIGNATURE OF APPLICANT _____

23. DATE: ____/____/____
DY MTH YR

PROGRAMMES OFFERED:

- Meetings and Events Mgt
- Principles of General Tour Guiding
- Tour Operators Training
- Cake and Pastry making
- Cooking with Confidence
- Cake Decorating (Inter)
- Cake Decorating (Adv)
- Effective Housekeeping
- Professional Bar Tending
- Dining Etiquette
- Excellence in Hospitality Service
- Basic Waitressing Skills

PLEASE NOTE:

- APPLICATION FEE: \$25.00
(Non refundable)

FOR OFFICIAL USE ONLY:

- RECEIVED ON: ____/____/____
DY MTH YR
- PROGRAMME _____
 ACCEPTED ? NOT ACCEPTED ?
- APPLICATION FEE PAID: _____
YES ? NO ?
- RESPONSE DATE _____
DY MTH YR

REMARKS: _____

SIGNATURE