

**Below sections are to be filled by the student - Please select the course you wish to enroll**

<b>Degree Programmes</b> <input type="checkbox"/> BEng (Hons) in Electrical & Electronic Engineering <input type="checkbox"/> BEng (Hons) in Robotics and AI <input type="checkbox"/> BSc (Hons) in Data Science <input type="checkbox"/> BEng/BSc (Hons) Top Up	<b>Pearson BTEC (HND)</b> <input type="checkbox"/> Digital Tech: <input type="checkbox"/> Electrical & Electronic Engineering <input type="checkbox"/> Computing <b>Certificate Courses</b> <input type="checkbox"/> CAIT <input type="checkbox"/> Foundation <input type="checkbox"/> English Weekend <input type="checkbox"/> Weekday <input type="checkbox"/> Reg.No. ....
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**Personal Details**

**PLEASE USE BLOCK CAPITALS**

Title															<input type="checkbox"/> Mr.	<input type="checkbox"/> Ms.	<input type="checkbox"/> Other	.....															
Name with Initials <i>(Ex- A.B.C Perera)</i>																																	
Name Indicated By Initials																																	
Gender															<input type="checkbox"/> Male	<input type="checkbox"/> Female	Date Of Birth (DD/MM/YYYY)				DD / MM / YYYY												
<input type="checkbox"/> NIC No.					<input type="checkbox"/> Passport No.					<input type="checkbox"/> Driving License No																							
Address																																	

Student's										Parent/Guardian									
Mobile										Name									
WhatsApp										Emergency No									
Email										Email									
										Profession									

**Entry Qualifications**

<b>O-Level Examination</b>	<input type="checkbox"/> Local O-Levels					<input type="checkbox"/> London O-Levels					Year					2				
	School																			
<b>Results</b>	Subject					Results					Subject					Results				
<b>A-Level Examination</b>	<input type="checkbox"/> Local A-Levels					<input type="checkbox"/> London A-Levels					Year					2				
	Stream																			
<b>Results</b>	Subject					Results					Subject					Results				

<b>Other Qualifications</b>														
Please Attach Copies Of Related Academic Certificates														
Extra-Curricular Activities (Sports, Music, etc...)														
Special Needs														

**DECLARATION OF APPLICANT**

Please check this box to confirm that you agree with the following statements.

"I confirm that the information given on this form is true, complete and accurate and no information requested or other material information has been omitted. I agree to abide by the rules and regulations of SLT-Mobitel Nebula Institute of Technology." **Course registration fee is non-refundable**

..... Date	..... Signature
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**Office Use Only****Marketing Survey**

Please select the media source(s) through which you get to know about this course.  
In completing this section, you are helping us to monitor the effectiveness of the marketing media.

<input type="checkbox"/>	Newspaper .....	<input type="checkbox"/>	Facebook	<input type="checkbox"/>	SMS	<input type="checkbox"/>	Friend	<input type="checkbox"/>	Other
<input type="checkbox"/>	Exhibition	<input type="checkbox"/>	E-Flyers	<input type="checkbox"/>	Radio	<input type="checkbox"/>	SLT Employee		
<input type="checkbox"/>		<input type="checkbox"/>	Training Centre Website	<input type="checkbox"/>	From Previous Student				

**Payments**

Amount		Receipt No														
Payment Method	<input type="checkbox"/> Cash	<input type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Cheque	<input type="checkbox"/> Online Transfer												
Received	<input type="checkbox"/> ID Copy	<input type="checkbox"/> Photos	<input type="checkbox"/> Edu. Certificates	Other.....												
Commencement informed by (Mention the date)																

**Filled by SLT employee**

I hereby confirmed that above details are true and correct

Name	:															
Service No	:															
Contact Details	:															
	:															
Email	:															
.....																
Signature										Date						

Current Course –	<b>Future Potential</b>	
Remarks -	Foundation	
	DT	
	EE	
	UH	
	Other	

**Below section is for OFFICE USE ONLY. – UH Degree Programme -****Admission**

Applicant No.		Year	
UCAS code(s)		Programme Code	
Pathway		Entry Level	
<b>Entry Qualifications</b>			
A-Level Examination Results	<input type="checkbox"/> Qualified	<input type="checkbox"/> Not - Qualified	
Certificates	<input type="checkbox"/> Attached	<input type="checkbox"/> Not - Qualified	
English Language Proficiency	<input type="checkbox"/> Qualified	<input type="checkbox"/> Not - Qualified	
Certificates	<input type="checkbox"/> Attached	<input type="checkbox"/> Not - Qualified	
<b>Academic Decision</b>			
<input type="checkbox"/> Unconditional	<input type="checkbox"/> Conditional	<input type="checkbox"/> Reject	
Conditions / Reason for reject			

.....  
Date

.....  
Signature