

Please attach one passport sized colour photograph

## DIPLOMA IN COMMERCIAL ARBITRATION APPLICATION FORM

1. Full name

Name to be appeared on the certificate

2. Title Mr. Mrs. Ms. Other

day / month / year

4. Sex Male Female

5. Address	
Residence	Official
Country	
Telephone number	
Email Address	
. Degree, diploma or teac	hing certificates
	ner educational diplomas or certificates. This information
	nining body, the full title of the award, the date awarded,
	mination, the length of the course and whether the course
was taken full time or part time.	
07. Occupational and prof	fessional qualifications
Give full details of any fina	al examination/s which you have passed, indicating
nembership (including level/stat	tus), if appropriate.
08. Other awards	
	ojects you have undertaken, including those which did not
ead to an examination.	, , , , , , , , , , , , , , , , , , , ,

09. English language proficiency A. What was your language of secondary education?
B. What language do you normally speak at home and at work?
10. Work experience What is your current/previous occupation? (Include length of service.) Please tell us if you are not working or are retired and give details of your previous employment.
11. What are your reasons for applying to register to this qualification?
Please give your reasons below in a minimum of 100 words; you may continue on separate sheet if you wish.)

- **12. Check list** (Please read the following carefully before posting your application.) This completed application form must be submitted to the **Institute for the Development of Commercial Law & Practice**, (address below) together with the following:
  - Certified evidence of your full name and date of birth (e.g. ID copy /statutory declaration or passport).
  - Certified evidence of all your academic/professional certificate(s) and proof of employment.
  - A passport sized photograph attached to the front of the application.

## Return all the above to:

Program Officer, Institute for the Development of Commercial Law & Practice, No.53/1, Ananda Coomaraswamy Mawatha, Colombo 7

**Declaration to be signed by the applicant** – please read carefully **before** signing

- a) I declare that the statements made by me on this form are, to the best of my knowledge and belief, true and correct.
- b) I agree to the Institute for the Development of Commercial Law & Practice (ICLP) processing my personal data contained in this form and other personal data that the ICLP may obtain from me or from other people connected with my studies and employment.

Signature	Date	
8		_