



# U.E.M.B.

**UNIVERSITY OF EXCELLENCE,  
MANAGEMENT AND BUSINESS.**

## **Application Form.**

*Woolford Avenue, Non Pareil Park, Georgetown, Guyana.*

*Telephone: Mobile: 592-681-3434, 592-618-3434.*

*Office: 592-225-1395-592-225-1397-9.*

*Email: [principal@uemb.edu.gy](mailto:principal@uemb.edu.gy).*

*Website: <http://uemb.edu.gy>*

### **Personal Details**

**Title:**

Mr, Mrs, Miss, Ms or specify other.

**Surname:**

Full Chinese or Muslim names should be entered here

**First Names:**

Any Western or Christian names should be entered here.

**Qualification:**

The name of qualification applying for.

**Home Address:**

  
  
  
  
  

Town:

County/State:

Post/Zip Code:

Country:

Please provide your full **home** address as follows:

House number or name

Street name

Town

County

Post/zip code

Country

**Preferred Address:**

  
  
  
  
  

Town:

County/State:

Post/Zip Code:

Country:

If you would prefer your correspondence to be sent to an address other than your home address, please provide details here - this should **NOT** be a college address

**Email:**

**Telephone:**

Please provide your personal/home numbers

**Mobile:**

**Fax:**

**Date of Birth:**

Day/Month/Year

## EDUCATION:

SUBJECT	EXAM BOARD	QUALIFICATION	GRADE	YEAR

## FURTHER EDUCATION:

UNIVERSITY/COLLEGE	COURSE	QUALIFICATION	LENGTH	DATE

Signature:

Name:  Date: