



## STUDENT EXEMPTION APPLICATION FORM

**STUDENT REGISTRATION NUMBER :** \_\_\_\_\_

**THIS FORM MUST BE FILLED BY ALL STUDENTS APPLYING FOR EXEMPTION FOR INSTITUTE OF BANKERS IN MALAWI STUDY PROGRAMMES**

Fax this form (together with the documents mentioned under section B) to 01 821 708 or post to: The Executive Director, Institute of Bankers in Malawi, 14 Laws Road, P.O. Box 1359, Blantyre.

Students should be able to get feedback on this application after seven working days.

### SECTION A

#### DETAILS OF APPLICANTS

Surname											
First names											
Maiden name and or previous surname											
Date of birth				Year		Month		Day			
Drivers License number or Passport number (tick)				DLN	PP						
Gender (tick)				Male				Female			
Telephone Number											
Home						Cell					
Work						Fax					
E-mail address											
Postal address											



