



CERTIFICATION APPLICATION FORM FOR UBIQUITY UNIVERSITY.USA
SKILLS FOUNDATION

Each module will get an individual Certificate from Ubiquity University in California USA & IIHRM

PART 1 – APPLICATION DETAILS		
Application Date		Application Ref # (HR to fill) *
Applicant's Full Name for Certificate		
Name of Organization *		
Employee Number *		
Address to mail the Certification		
Present Job Title *		
Contact telephone number		Email:

* Only applicable to corporates

PART 2 – QUALIFICATION APPLIED FOR – APPLICANT'S STATEMENT OF PREFERENCE		
Select <input checked="" type="checkbox"/>	Certificate of Participation: First Preference	Date of Course
<input type="checkbox"/>	Meeting Global Challenges	
<input type="checkbox"/>	Team Building and Collaboration	
<input type="checkbox"/>	Innovation and Social Entrepreneurship	
<input type="checkbox"/>	Emotional Intelligence	
<input type="checkbox"/>	Critical Thinking and Problem Solving	
<input type="checkbox"/>	Leadership (Getting Ready to Lead)	
<input type="checkbox"/>	Building Global Community	

Each workshop duration is are for 5 to 6 hours and will be at **IIHE # 25, Station Road, Bambalapitiya.**

PART 3 – PAYMENT				
Attach Payment Proof & email to finance@iihrm.biz	Deposit Slip <input type="checkbox"/>		Online TT <input type="checkbox"/>	
	BANK NAME	Number of Module/s	Modules Date/s	Payment Date
Amount paid to: IIHRM PVT LTD AC#: 1117007600 Bank Name: Commercial Bank Branch Name: Pitta Kotte Branch				

I hereby declare that the above information is true and valid to the best of my knowledge

Applicant's Signature:	Date:
NIC/Passport #:	

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