**Centre for African Studies**

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 University of Mumbai

**Application Form**

**Certificate Course in International Trade (Africa)**

Academic Year – **2014 – 2015**

Last Date for Form Submission – **4th November 2014**

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| --- | --- |
| 01. Name of the Applicant(Beginning with surname inBLOCK LETTERS) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SURNAME FIRST NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MIDDLE NAME MOTHER NAME |
| 02. Date of Birth |  |
| 03. Nationality |  |
| 05. Do you belong to the S.C./S.T.Backward Class? If so, PleaseGive Details. |  |
| 06. Father’s/Guardian’s Name andOccupation |  |
| 08. Address for Correspondence |  |
| 09. Permanent Address |  |
| 10. Telephone and Mobile No. if any |  |
| 11. E–mail ID |  |

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| --- | --- | --- | --- |
| Examination andYear of Passing | Name of theSchool/College | Name of theBoard/University | Subject Offered |
| (i)  |  |  |  |
| (ii)  |  |  |  |

I hereby declare that the above entries made by me are correct to the best of my knowledge. I assure that, if selected I shall attend the classes regularly and abide by the rules that may come into force from time to time.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of the Applicant