

STUDENT REGISTRATION & INTAKE FORM



FOR OFFICE USE ONLY

Student ID: 124 Date of Adm: _____
Campus: - Query Source: NEBOSH Registration Form

COURSE INFORMATION

Course Name: Graphic Designing Preferred Session: Morning
Mode of Study: Online Course Date: 2026-02-05
Reason for Taking Course: Certification

PERSONAL DETAILS

Title: Ms Gender: Female
First Name: Saima Surname: malik
Date of Birth: 06-12-2004 CNIC / Passport: 6530099069-
Nationality: Pakistan Passport No: _____
Job Title: SE Company Name: HL

CONTACT & ADDRESS DETAILS

Current Address: lahore
Address Type: Home Postcode: _____
Country: Pakistan Email Address: test1@gmail.com
WhatsApp No: 03001234567 Telephone (Phone): 03001234567
How did you hear about us?: Friend

EDUCATION & EXPERIENCE

Final Learning Level: Diploma English Proficiency: Beginner
Qualification: BS Total Experience: _____

RESIT EXAM STUDENT DETAILS

Prev Partner No & Name: rr

Learner Number: yy Qualification Name: eee

Unit Resit: Unit2 Reason for Resit: Self Account

PRE CONSULTING QUESTIONS & ANSWERS

Q1: English Language Proficiency (Describe safety procedure in workplace in English and how to explain to colleague)

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Q2: General Understanding (Workplace safety importance & role in preventing accidents)

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Q3: Knowledge of NEBOSH HSA (What is it and why is it essential)

Knowledge of NEBOSH HSA

Q4: Practical Application (Steps to take on unsafe working condition & communication to supervisor)

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PAYMENT & ACCOUNT DETAILS

Payment Information: Self Account

UPLOADED ATTACHMENTS

CNIC Front / Passport:

 CNIC Front

CNIC Back:

 CNIC Back

Last Degree:

 Last Degree

Other Attachment:

 Other Attachment

DECLARATION

I certify that the information given above is complete and correct to the best of my knowledge and hereby undertake to comply with all the rules & regulations of the organisation as of today and framed from time to time in future and that I shall accept the decision of the disciplinary committee of the organisation in case of breach of any rules & regulations.

☒ I agree to the above terms and conditions

☒ I confirm that I understand and agree to all the course registration policies. I have read and accepted the [terms and conditions](#).



Applicant Signature

CNIC / Passport Number

Date