



## FEE PAYING FORM

SECTION A: BIODATA
SURNAME:
FIRST NAME:
OTHER NAME(S):
GENDER:
TITLE (MR, MRS, MS):
NATIONALITY:
NAME OF EMPLOYER:
JOB TITLE:
PRESENT GROSS SALARY:
SECTION B: MODE OF FINANCING OF PROGRAMME:
Please tick ( $$ ) preferred choice of financing your programme
☐ SCHOLARSHIP  If not successful with scholarship, will you consider self-financing option?
□ SELF-FINANCING