

FOR OF	FICE US	E ONLY	

# **APPLICATION FORM**

Incomplete information may lead to application being rejected without notification. Make sure all required documents are attached. Please write clearly in black ink as it may be necessary to copy the form. Do not use felt pen as they can leak through the paper. Application forms duly filled in should reach Constance Hospitality Training Centre before the closing date as specified.

•	Course Title:	INTAKE:			
	(Write the exact course name and the intake date as per advert OR call the CHT	C on 413 4600 for more	e details)		
•	Have you benefited from National Skills Development Programme	e (NSDP) in the pas	st?	YES	NO 🗌
•	<b>PERSONAL DETAILS</b> (Please write your surname & other name(s) as they a correspondences, records, certificates and reference that CHTC may provide. "Pr				
			*Applic	able for over	seas students
	TITLE:	NATIONALITY:	Mauritian		
	SURNAME:		Other		
	OTHER NAME(S)	*If not M	1auritian, sp	ecify	
	PREFERRED NAME (if applicable)	*PASSPO	DRT No		
	DATE OF BIRTH: NATIONAL IDENTITY	NO.:			
	ADDRESS FOR CORRESPONDENCE:	TELEPHONE NO:	HOME	:	
			OFFICE	:	
			MOBILE	:	
		EMAIL:			
	CONTACT DETAILS IN CASE OF EMERGENCY:				
	FULL NAME:	CONTACT NUMB	ED.		

**4. EDUCATION HISTORY** (Attach copies of your educational certificates with this application form and bring the originals when called at Constance Hospitality Training Centre.)

YEAR	SCHOOL/INSTITUTION	COUNTRY	NAME OF QUALIFICATION	DURATION



**5. LANGUAGE ABILITY** (We require this information as most of our courses and exams are being held in either English or French.) Tick as appropriate:

LANGUAGE	GOOD UNDERSTANDING	READ	WRITE	SPEAK
english				
FRENCH				

**6. EMPLOYMENT HISTORY** (To advise you on the most appropriate course which would best fit the skills and experience you have already acquired and thus guide you in your career path.) You may be required to provide the contact information of professional references.

PERIOD OF EMPLOYMENT	COMPANY NAME	COUNTRY	JOB TITLE

while on WEP. Students are required to pay for a one-off fee amo	ounting to MUR 5,000 o	r above, to CHTC.
the cost of the student. Accommodation will be provided free of charge.	A monthly stipend will also	be paid to students
All students of CHTC are eligible to apply for WEP for a maximum period of	of six months in Seychelles.	Air tickets shall be at

Are you interested to join the 'Work Experience Programme' in Seychelles after your course?	YES	NO L	╛
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3	WHERE DID YOU I FARN AROUT THE COURSES BEING OFFERED BY	<b>~H</b> 7	$\Gamma$

Friend or Relative	Constance Employee	Newspaper	From an ex-student	Posters or Flyer	
Open day or other Even	t (please specify):				

# 9. ADDITIONAL DOCUMENTS NEEDED IN ORDER FOR CHTC TO CONSIDER YOUR APPLICATION:

(Please tick the ones provided with this form)

1	Copy of medical certificate	
2	Copy of character/morality certificate	
3	Copy of NID card	
4	Copy of food handlers certificate	

5	Copy of educational certificates & testimonials	
6	Copy of birth certificate	
7	Copy of passport (applicable for foreign students)	
8	Six passport-sized photos	

# 10. PROMOTIONAL MATERIALS

CHTC usually makes photos or short videos during trainings or any other events held at the academy, in which you may be featured. These images are used to promote services offered by CHTC through a range of materials including, but not limited to posters, newsletters, magazine articles, television programs and publications for the internet.

Do you wish your picture or video be used by CHTC for promotional materials?	YES	N	> <u></u>
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Do you wish to receive the CHTC newsletter and information about new courses? YES NO

You may opt out at any time upon written notification to CHTC.



#### 11. DATA PROTECTION

At Constance Hotels & Resorts, we care about your privacy, personal data & well-being. Personal data submitted will be used as explained hereunder. For more information on our privacy practices, please review our Privacy Policy on our website at <a href="https://www.constancehotels.com/en/privacy-policy">www.constancehotels.com/en/privacy-policy</a>.

# PURPOSE

- Personal information provided shall be used internally by CHTC for selection and other administration purposes.
- A medical certificate is required for eligibility on courses related to Kitchen and Food & Beverage
  and to ensure that such exposure would not have any adverse effect on your existing health
  conditions.
- A Police Character Certificate or Morality Certificate is a normal requirement for joining any training institution and for job placement.

#### ii. RETENTION

- Students' records are kept at CHTC at least for 7 years after termination of the course.
- Application forms of unsuccessful applicants are maintained for a period of 12 months.

#### iii. DISCLOSURE

Your personal data may be shared with:

- the Mauritius Institute of Training and Development (MITD), for administrative purposes.
- Constance Hotels as well as Partner Hotels, for Job Placement.
- Recruitment Agencies, for recruitment purposes.

### v. ACCURACY AND UP TO DATE

If any of the information supplied above happens to change, the candidate should notify to CHTC within the least delay.

## v. DATA SUBJECT RIGHTS

Under the Data Protection Act 2017 of Mauritius you have the right of access, rectification or erasure of personal data held by CHTC, as well as the right to object or restrict processing of such data. You may exercise your rights, upon written request to CHTC and subject to other applicable conditions.

## 12. CANCELLATION

- CHTC may cancel any advertised courses due to insufficient enrolment.
- Cancellations by applicants will be subject to the following conditions:
  - o 14 days or more before the start of the course 100% refund of fees paid.
  - Less than 14 days before the start of the course no refund of fees paid.

### 13. PAYMENT

- Payment shall be made either in cash or by office cheque.
- In case payment is not made in accordance with agreed terms or the amount is not paid in full, you might not be eligible to sit for the examination or you may not be allowed to attend classes unless acceptable written reason is provided.
- The above conditions apply to both where payment is made by self or by sponsor.





#### 14. DECLARATION OF APPLICANT

I, the undersigned, declare that all the information provided in this application and the supporting documentation is complete and true to the best of my knowledge. I acknowledge that the provision of incorrect information or documentation relating to my application may result in the cancellation of my enrolment. I have read / have been informed of and fully understand the CHTC policies and procedures. I agree to the terms and conditions stated in this application form.

Applicant's Signature:	Name and signature of responsible party - for candidates under age of 18 years:
	Full name of responsible party:
Date:/	Sig.:
	Date:/