



THE INTERNATIONAL OPEN UNIVERSITY (GOLGOTHAS)

REGISTRATION FORM

1) Name _____

2) Sex _____ Male/Female (3) Age _____ 4) Date of Birth _____

5) Country of birth _____ 6) Place of birth _____

7) Nationality _____ 8) Occupation/Profession _____

9) Telephone (Office)Cell _____

Landline

Telephone (Residential)Cell _____

Landline

10) Marital Status _____ Single, Married, Divorced, Widowed

11) Email _____ Fax (if any) _____

12) Course of Choice _____

13) Academic Qualifications: 1) Schools attended with dates _____

14) Referees: 1) Name _____ Tel. No _____

Email _____

2) Name _____ Tel. No _____

Email _____

15) Reasons for Choosing IOU _____

16) Reasons for Choosing the Course of Study _____

17) PLEDGE

If admitted, I pledge to be of good behaviour and to abide by the rules and Regulations of the Institution failing which, I should be rusticated or expelled.

Name _____

Signature _____

Date _____