



Application Form

Please send the application form to:
Sara Khan
Mapalim
181-183 Queen's Crescent
London NW5 4DS

Or email it to:
sara@mapalim.com

Name: _____

(Please write your name as you would want it to appear on any certificates)

Date of Birth: ____ / ____ / ____
dd / mm / yyyy

Home Number: _____

Mailing Address: _____

Mobile Number: _____

Work Number: _____

Email Address: _____

Who will be paying your course fees?

Describe your current job role:

Describe your previous work experience:

Why are you interested in undertaking the course applied for?

Please provide the name of a suitable referee, with contact details:

Places ARE limited, so the sooner you return your form, the more likely that you will get a place!
Tel: 020 7284 3215 Fax: 020 7284 2268

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