

SDP REGISTRATION FORM

Please note:

- **This application is composed of two parts.** The application will be reviewed once it is fully completed.
- **Part 1** is to be completed by a sponsoring official and **Part 2** by the applicant(s).
- Copy **Part 2**(Page 2&3) for more applicants.

PART 1-To be completed by Sponsoring Officer (E.g. CEO, HR Head, T&D Head, L&D etc.)

Please indicate the Program:	
Date of the Program:	
Number of Participants Nominated:	

Sponsoring Officer Details	
Name of sponsoring person	
Designation	
Department	
Organization	
Business Address	
Telephone	
Fax	
Mobile	
E-mail	

Signature of Sponsoring Official: _____ **Date:** _____

Please Attach
Two Recent
(1x1)Photographs

PART 2– Personal Application Form

Please fill all sections. Please make sure correct name spellings for certificates.

Participant Details							
Title: (Mr., Ms., Dr., etc.)							
Name (BLOCK CAPITAL)							
CNIC #							
Date of Birth							
Last Degree/Qualification							
Present Designation							
Present Department							
Present Organization							
Preferred Email							
Mobile Number							
Postal Address							
Vehicle #							
IBA Alumni	No		Yes		If Yes, Batch		Program

Your Functional Areas: (Please X the relevant box)

1. R&D	
2. Finance/Control/Accounting/Audit/ Treasury	
3. Sales/Distribution/Marketing/Advertising/PR	
4. Human Resource & Administration/ Learning & Development/Trainings	
5. Manufacturing/Production/Technical	
6. Logistics/Supply Chain Management	
7. Technology/Knowledge Management	
8. Consulting/Legal	
9. General management	
10. Education management	
11. Teacher/Trainer	
Other functional management (Please specify)	

How did you hear about the program?

<input type="checkbox"/>	Senior Official
<input type="checkbox"/>	Colleague
<input type="checkbox"/>	Human Resources Department
<input type="checkbox"/>	Through Mail
<input type="checkbox"/>	Word of mouth
<input type="checkbox"/>	Social Networks
<input type="checkbox"/>	IBA's website
<input type="checkbox"/>	Advertisement (Please specify the publication) _____

Other (Please specify) _____

Checklist for Documents:

- Documents Attached
- Copy of CNIC
- Two 1 X 1 Photographs
- Copy of Intermediate/A levels Marks Sheet in case of Advance Interactive English Course & Skill Development

Note:

Participants with less than 90% attendance at the end of the course will not be awarded Certificate (applicable for all short courses of duration less than 40 hours)

Participants with less than 80% of attendance or score less than 60% at the end of the course will not be awarded Certificate (applicable for 40 hours courses)

Applicant's Signature: _____ **Date:** _____

The completed Application Form can be either attached to an email and sent to BE&SDP@iba.edu.pk or printed and posted to our mailing address:

**Skill Development Program, Center for Executive Education,
Institute of Business Administration, City Campus, Garden/Kayani Shaheed Road, Karachi, Pakistan**

Payment Method:

Step 1: Click on the link (or copy the link in your browser)http://140.174.69.133/fee_vouchers/

Step 2: Fill in the complete form

Select "Faysal Bank" for payment. Fee can be deposited in any branch of Faysal Bank

BANK	Faysal Bank
ERP ID	123
PROGRAM	
NAME	
EMAIL	
AMOUNT	
Semester	Fall 2013
FEE Type	Skill Development Program Fee
DATE	
Branch Name	
Cheque/PO #	

Insert "123" as default ERP ID

Specify the Course/workshop you are applying for e.g. Business Communication, Excel 2010

Step 3: Click "Submit", print the fee voucher and submit the voucher in Faysal Bank

Step 4: Submit the Program Office & Finance Department copy of the fee voucher along with the registration form at the Skill Development Program, IBA City Campus

Note: Fee is not acceptable in cash or cheque at our office
IBA reserves the right for cancellation of any workshop in case of contingency. Please note that the registration is limited on first come first serve basis, therefore, confirm your registration **5 days before the workshop.**

IBA being an educational institution is exempt from tax under Clause 92, Part 1 Second Schedule, of Income Tax Ordinance 2001. Tax exemption certificate and NTN # is available at <http://www.iba.edu.pk/finance.phpl>

Cancellation Policy:

Cancellation charges are as follows

5 days before start of workshop	No Cancellation Charges
Within 4 days prior to workshop	50% of the program charges
1 day prior to workshop	100% of the program charges

For more information, please visit our website: www.iba.edu.pk or contact us

Contact: Center for Executive Education, Institute of Business Administration, City Campus, Garden/Kayani Shaheed Road, Karachi, Pakistan.

Tel: (021) 38104700 (Ext: 1801, 1541)

Fax: (021) 38103008, (021) 38103011

Email: BE&SDP@iba.edu.pk

Website: <http://cee.iba.edu.pk/BEnSDP.shtml>

Facebook: <https://www.facebook.com/IbaBusinessenglish>

LinkedIn: <http://www.linkedin.com/pub/besdp-iba/77/704/259>