

PACIFIC MARITIME TRAINING COLLEGE "Your Training Solution"

Elanese Street, PO Box 656 Konedobu, Port Moresby, NCD, Papua New Guinea

Mobile: +675 79335868/ +675 77932111

Email: pmtcreception@gmail.com

Application Form for Enrollment		General Purpose (GP)				YES	NO	
for Enrollme	nt		SOLA	S (Refreshe	er)	YES	NO	
Course Name								
SECTION 1: APPLIC	ANT PER	SONAL DI	ETAILS					
SURNAME:		0	GIVEN NAMES	:				
POSTAL ADDRESS:								
HOME ADDRESS:			SEX	: MALE	FEMA	LE		
EMAIL ADDRESS:				_				
TELEPHONE:								
OTHER DETAILS								
DATE OF BIRTH :								
PLACE OF BIRTH :								
MARITAL STATUS:						рното		
NAME OF SPONSOR:								
PHONE NUMBER/ POSTAL ADDRESS:								
EMAIL:								
DOCUMENTS	DOC. NO	ISSUED	EXPIRES	ISSUING AU	G AUTHORITY		ISSUING PLACE	
NID BIRTH CERTIFICATE/CARD								
MEDICAL FITNESS CERTIFICATES								
POLICE CLEARANCE / CHARACTER REFERENCE								
CREWMAN'S BOOK								
PASSPORT- NATIONAL								
EDUCATIONAL BACKGRO	DUND							
				D	ATES	OUA	LIFICATION	
NAME OF INSTITUTION		COURSE ATTENDED		FROM TO		GAINED		

SECTION 3: MANDATORY REQUIREMENTS FOR TRAINING

	ensure you only	CK-LIST y tick the sections v	which are in	cluded wit	h this form)	
General Purpose (GP R	Rating 2)			1	4 weeks	K10,950.00
□ Basic SOLAS (Refresh	ner)			5	days	K3,400.00
Other Course:						
Minimum age 18 years and applic	cant should be ab	ble to swim				
Grade 8 or above (or equivalent e	educational study) results and Certifi	cates attache	ed		
NID, NMSA Medical Fitness Cer	rtificate, Police C	learance Certificate	e copies, 5 pa	assport sized	l photos to b	e attached
For SOLAS applicants only, atta	ach copies of CE	RB (all pages)				
The applicant must provide their	own <u>face mask</u> i	n compliance with	Covid-19 sat	fety procedu	ires	
The applicant should not drink al	cohol, take drugs	, or chew "betel nu	t" during per	iod of train	ing	
Please enquire for a quotation fro invoice. The Fees to be paid to P	acific Maritime	Training College,	BSP bank a			
Moresby Branch, BSB 088-294 Note: PMTC will not be respon	and payment cor sible for any pay	firmation to be atta vments made outs	iched. i de this acco	unt.		
SECTION 4: CAREER	DETAILS					
SECTION 4: CAREER DETAILS OF LICENCES / CE QUALIFICATIONS		RANK	ISSUE	DATE	EXPIRE	ISSUING AUTHORITY
DETAILS OF LICENCES / CE	CRTIFICATES	RANK	ISSUE		EXPIRE	
DETAILS OF LICENCES / CE	CRTIFICATES	RANK	ISSUE		EXPIRE	
DETAILS OF LICENCES / CE QUALIFICATIONS	DOC. NO	RANK	ISSUE		EXPIRE	
DETAILS OF LICENCES / CE QUALIFICATIONS	DOC. NO	RANK				
DETAILS OF LICENCES / CE	DOC. NO	RANK RANK				
DETAILS OF LICENCES / CE QUALIFICATIONS IMO COURSES (STCW 95)	DOC. NO		STCW9	5 TRANING	COURSES	AUTHORITY RY ISSUIN
DETAILS OF LICENCES / CE QUALIFICATIONS IMO COURSES (STCW 95) NAME OF COURSE PERSONAL SURVIVAL TECHNIQUE	CRTIFICATES DOC. NO	REG. STCW95 A-VI/1-1	STCW9	5 TRANING ISSUED	COURSES	AUTHORITY RY ISSUIN
DETAILS OF LICENCES / CE QUALIFICATIONS IMO COURSES (STCW 95) NAME OF COURSE PERSONAL SURVIVAL TECHNIQUE BASIC FIRE FIGHTING	CRTIFICATES DOC. NO	REG. STCW95 A-VI/1-1 A-VI/1-2	STCW9	5 TRANING ISSUED	COURSES	AUTHORITY RY ISSUIN
DETAILS OF LICENCES / CE QUALIFICATIONS IMO COURSES (STCW 95) NAME OF COURSE PERSONAL SURVIVAL TECHNIQUE	CRTIFICATES DOC. NO S	REG. STCW95 A-VI/1-1	STCW9	5 TRANING ISSUED	COURSES	AUTHORITY RY ISSUIN
DETAILS OF LICENCES / CE QUALIFICATIONS	DOC. NO	RANK				
DETAILS OF LICENCES / CE QUALIFICATIONS IMO COURSES (STCW 95) NAME OF COURSE PERSONAL SURVIVAL TECHNIQUE BASIC FIRE FIGHTING ELEMENTARY FIRST AID	CRTIFICATES DOC. NO S	REG. STCW95 A-VI/1-1 A-VI/1-2 A-VI/1-3	STCW9	5 TRANING ISSUED	COURSES	AUTHORITY RY ISSUIN
DETAILS OF LICENCES / CE QUALIFICATIONS IMO COURSES (STCW 95) NAME OF COURSE PERSONAL SURVIVAL TECHNIQUE BASIC FIRE FIGHTING ELEMENTARY FIRST AID	CRTIFICATES DOC. NO S	REG. STCW95 A-VI/1-1 A-VI/1-2 A-VI/1-3	STCW9	5 TRANING ISSUED	COURSES	AUTHORITY RY ISSUIN

Date: / /

SECTION 6: PAYMENT TERMS AND CONDITIONS

Payment :

- i. Before making payment, make sure <u>all</u> requirements are complete and an acceptance letter and an invoice has been sent to you or sponsor.
- ii. All payments are to be made against invoice issued
- iii. Description of payment must be the invoice number issued.
- iv. All short courses are to be paid in full, no part payments will be accepted.
- v. All tuition fee should be paid in full before course begins in order to receive your certificate.
- vi. ALL payments must be deposited directly in to the college account and the deposit slip and relevant documents brought/sent to the college.

College Bank Details:

Account Name: **PACIFIC MARTIME TRAINING COLLEGE** Account Number: **100 159 1980** BSB: **088-294** Bank: **Bank South Pacific (BSP)**

Address: Elanese Street, Section 37, Allotment 04, Konedobu, Port Moresby, NCD, PNG. Refund:

- i. Pacific Maritime Training College is a private institution and is governed by its own rules and regulations.
- ii. <u>PMTC charges 20%</u> on all over-payments of tuition fees, withdrawal or any other refund matters.
- iii. Before making payment, make sure an acceptance letter has been issued in your name by the school and an invoice has been sent to you or sponsor
- iv. Refund payments are to be made according to the invoice issued to sponsor.
- v. Each refund request is investigated and must follow the refund procedure.
- vi. Refunds can only be made to the sponsor or the payee directly.
- vii. These conditions are set in place to discourage fraudulent claims, false government payments and refund requests.

I hereby acknowledge that I have read and understood the payment terms and conditions and I agree to all these terms.

Signature: _____

Date: / /

PMTC FORM 2025