

## Registration of Interest Form

### Personal Information

<b>Name:</b>	
<b>E-mail address:</b>	
<b>Mobile number:</b>	
<b>Nationality:</b>	
<b>Qatar I.D. number:</b>	
<b>D.O.B.:</b>	

Name of Course(s) Interested in:	When are you interest in joining? (Please x where applicable)
	<input type="checkbox"/> As soon as possible <input type="checkbox"/> Within next 3 months <input type="checkbox"/> Within next 6 months <input type="checkbox"/> Within the coming year <input type="checkbox"/> Other _____
	<input type="checkbox"/> As soon as possible <input type="checkbox"/> Within next 3 months <input type="checkbox"/> Within next 6 months <input type="checkbox"/> Within the coming year <input type="checkbox"/> Other _____
	<input type="checkbox"/> As soon as possible <input type="checkbox"/> Within next 3 months <input type="checkbox"/> Within next 6 months <input type="checkbox"/> Within the coming year <input type="checkbox"/> Other _____

### Academic Qualifications

Qualification	Institute	Results

<b>Applicant's Signature</b>	
<b>Date</b>	

**Note:** By providing your details you understand and allow Qatar Skills Academy to occasionally contact you with brief promotional messages about it's services. If you no longer want to receive these messages contact [info@qatarskillsacademy.com](mailto:info@qatarskillsacademy.com) and request to be removed from further promotional messages.