



UNIVERSITY OF THE WEST INDIES

DEPARTMENT OF COMPUTER SCIENCE, MATHEMATICS & PHYSICS

APPLICATION FOR ADMISSION TO THE

Computing Technology Industry Association (CompTIA)

Please tick the appropriate box to show which module you are applying for:

<b>CompTIA Full Package</b> <input type="checkbox"/>		
<b>CompTIA Security +</b> <input type="checkbox"/>	<b>CompTIA A+</b> <input type="checkbox"/>	<b>CompTIA Network+</b> <input type="checkbox"/>

- Complete the form and return to the Secretary, Department of Computer Science, Mathematics & Physics, Cave Hill Campus, P.O. Box 64, Bridgetown, Barbados. Form(s) must reach the Department at least one week before the start of the module you are applying for.
- Please complete this form legibly and accurately. The Department will not process forms which are illegible or incomplete.
- Print boldly using a ball point pen. DO NOT WRITE IN SHADED AREAS.

**PERSONAL DATA**

<p>1. Surname/Family Name (BLOCK CAPITALS)</p> <p>_____</p> <p>2. Other names(s)</p> <p>_____</p> <p>3. Correspondence address</p> <p>_____</p> <p>_____</p> <p>4. Telephone</p> <p>Home: _____ Mobile: _____</p> <p>5. Home Address (if different from above)</p> <p>_____</p> <p>_____</p> <p>6. Emergency Contact Number(s):</p> <p>Home: _____ Mobile: _____</p> <p>_____</p>	<p>7. Email Address:</p> <p>_____</p> <p>8. Male(M) <input type="checkbox"/> Married(M) <input type="checkbox"/></p> <p>Female(F) <input type="checkbox"/> Single(S) <input type="checkbox"/></p> <p>9. Date of Birth (Year/Month/Day)</p> <p>10. Your age last birthday _____ Years</p> <p>11. Country of birth _____</p> <p>12. Nationality _____</p> <p>13. Religion _____ (Applicants need not answer this question if they prefer not to.)</p> <p>14. Do you have a disability? YES <input type="checkbox"/> NO <input type="checkbox"/> (If yes please specify)</p>
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15. Have you completed any CompTIA certificates? YES  NO  Year: \_\_\_\_\_

16. COMPUTER EXPERIENCE:

NETWORKING: YES  NO

PROGRAMMING: YES  NO

REPAIRS: YES  NO

SECURITY: YES  NO

