



APPLICATION INSTRUCTIONS:

To complete the application procedure, complete all sections of the application form

***Personal data *Aptitude form (A1) *Medical form**

PERSONAL DATA:

Pages 3 and 4 are to be completed by the applicant

ESSAY:

Compose and attach your (TYPED**) essay of 300 words:**

- **Topic: Why you choose to study at ABHTI and the career you hope to have.**

APTITUDE FORM (A1):

This form **MUST BE** completed by any of the following and must be **STAMPED** with the official stamp of the Institution

- Principal/Teacher
- Employer
- Head of Organization/Department

Requirements for acceptance into Programmes:

1 year - Certificate Programme: 3 CXC subjects to include English A

2 year - Associate Degree: 5 CXC subjects to include English A

Mature Students (35 years and over)

2 letters of recommendation (one from a current employer and the other from a past employer/supervisor)

Medical form:

The **Medical Form** must be completed and signed by a medical doctor

The document must be stamped and signed

Attach copies of documents listed below, and also bring the original documents for verification:

- Secondary School Transcript
- CXC/CAPE/GCE Certificate
- Other Certificates Attained
- Birth Certificate
- If a non-national – valid passport
- One passport-sized picture

REGISTRATION FEE IS SUBJECT TO CHANGE AND IS **NON-REFUNDABLE**.

REGISTRATION PERIOD: JUNE TO JULY (EXCLUDING WEEKENDS) – FEE: **EC\$125.00**

LATE REGISTRATION PERIOD: AUGUST/SEPTEMBER – FEE: **EC\$175.00**

For official use only:

Programme:

*Glue
Passport
picture
here*

Please Print

APPLICATION FOR ADMISSION

Last Name: _____ Middle Name: _____ First Name: _____

Date of Birth: (day/month/year): ____/____/____ Age: ____ Gender: M ☐ F ☐

Physical Address/Village: _____ Parish: _____

Country of birth: _____ Nationality: _____

Applicant's contact number ONLY: _____

Applicant's email address ONLY: _____

EDUCATION:

Secondary/Tertiary Institutions ONLY

School/College: _____ Dates: _____ to _____

INDICATE YOUR PROGRAMME OF INTEREST BY PLACING A TICK IN THE BOX PROVIDED

2 YEAR ASSOCIATE DEGREE PROGRAMMES

☐ Culinary Arts - ☐ Day time | ☐ Night time

☐ Hospitality Management

☐ Food & Beverage Management

☐ Tourism Management

1 YEAR CERTIFICATE PROGRAMMES

☐ Basic Cookery

☐ Front Office & Restaurant Operations

***EMERGENCY CONTACT:**

Mother: _____

Contact number: _____

Father: _____

Contact number: _____

Other: _____

Contact number: _____

Relationship to you: _____

ACADEMIC QUALIFICATIONS: RECORD PASSES I, II AND III ONLY

(CXC/GCE/CAPE/Higher level certificates and equivalent, subjects passed, grades)

Subject	Proficiency	Grade

Tick the appropriate box

Have you applied to ABHTI before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Were you accepted?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

How did you hear about ABHTI? Tick the appropriate box.

Friend <input type="checkbox"/>	Relative <input type="checkbox"/>	Past Student <input type="checkbox"/>	School <input type="checkbox"/>
Website <input type="checkbox"/>	Facebook <input type="checkbox"/>	Instagram <input type="checkbox"/>	

OFFICIAL USE ONLY		
Registration:	Paid <input type="checkbox"/>	Unpaid <input type="checkbox"/>
Date paid:		
CXC subjects attained?		
Awaiting results?		
Passed English A?		

MATURE STUDENTS MUST ALSO PRODUCE 2 LETTERS OF RECOMMENDATION

READ AND SIGN:

I give permission for the Administration of the Antigua and Barbuda Hospitality Training Institute to verify, if necessary, information provided on this application. I understand that my application and all supplemental materials will be held in the strictest of confidence. I understand that acceptance a place at ABHTI, I agree to policies, standards and procedures.

APPLICANT'S SIGNATURE: _____ **DATE:** _____

Check list	
	Birth Certificate (original and copy)
	Medical Form (stamped and signed)
	Aptitude Form (stamped and signed)
	1 Passport-sized picture
	CXC Certificate (original and copy)
	School Transcript (<u>sealed</u> from the school or emailed)
	Essay (typed)
	Passport if non-national (original and copy of time and biometric page)
	If over 25 years of age – 2 Letters of recommendation (one from a current employer and the other from a past employer/supervisor)