MANAGEMENT DEVELOPMENT AND PRODUCTIVITY INSTITUTE (MDPI)

PARTICIPANTS RECORD SHEET

Name of Course: .....

Course Date: *Start*: ..... *End*: .....

PERSONAL DETAILS

Full Name of Participant (*Capitals and no Initial. Name entered will appear on your Certificate*)

Sex: Male ☐ Female ☐ Date of Birth: DD MM YYYY

Highest Level of Education: .....

E-mail address:

Postal Address:

Telephone Number:

Employer's Details

Name of Organization: .....

Postal Address: .....

E-mail address:

Telephone Number:

Contact Detail of Immediate Supervisor

Name of Contact Person for Fees Payment .....

.....

Telephone Number

I certify that I have read the above instructions and answered all questions correctly and truthfully to the best of my knowledge.

Participant's Signature .....

Course Coordinator's Name and Signature: .....