
AGENT COURSE PROVIDER APPLICATION FORM

UNITED KINGDOM ASSOCIATION OF PROFESSIONALS

AGENT DETAILS (OPTIONAL)

Agent Name :	Click here to enter text.
Address :	Click here to enter text.
Email :	Click here to enter text.
Mobile :	Click here to enter text.

Prospective Institutions can apply for Courses to be accredited by UKAP.

ORGANISATION DETAILS

Full Name of Institution:	Click here to enter text.
Org Ref No.:	Click here to enter text.
Person to be contacted for this application progress:	Click here to enter text.
Job Title:	Click here to enter text.
Telephone No.:	Click here to enter text.
Email Address:	Click here to enter text.

ACCREDITATION DETAILS

Level & Courses for which accreditation is requested (Tick as appropriate)

CERTIFICATE

Course Description	Mode: F/T, P/T or Distance Learning	Duration in Hours
Click here to enter text.	Choose an item.	Click here to enter text.
Click here to enter text.	Choose an item.	Click here to enter text.
Click here to enter text.	Choose an item.	Click here to enter text.
Click here to enter text.	Choose an item.	Click here to enter text.

DIPLOMA

Course Description	Mode: F/T, P/T or Distance Learning	Duration in Hours
Click here to enter text.	Choose an item.	Click here to enter text.
Click here to enter text.	Choose an item.	Click here to enter text.
Click here to enter text.	Choose an item.	Click here to enter text.
Click here to enter text.	Choose an item.	Click here to enter text.



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VOCATIONAL DIPLOMA

Course Description	Mode: F/T, P/T or Distance Learning	Duration in Hours
Click here to enter text.	Choose an item.	Click here to enter text.
Click here to enter text.	Choose an item.	Click here to enter text.
Click here to enter text.	Choose an item.	Click here to enter text.
Click here to enter text.	Choose an item.	Click here to enter text.

PROFESSIONAL GRADUATE DIPLOMA

Tick Here	Course Description	Mode: F/T, P/T or Distance Learning	Duration in Hours
Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

Course start dates: Click here to enter a date.

Course end dates: Click here to enter a date.

I hereby confirm that these courses are designed by the institutions. They are not copies from any other institution.

Mobile: Click here to enter text.

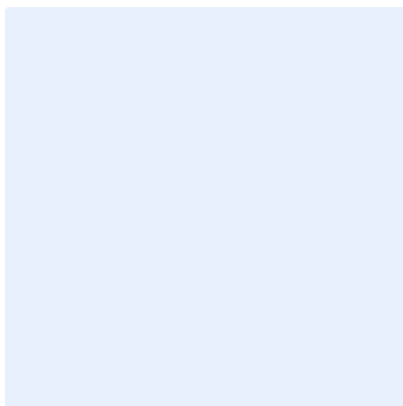
Email: Click here to enter text.

Direct Name: Click here to enter text.

Date: Click here to enter a date.

PICTURES

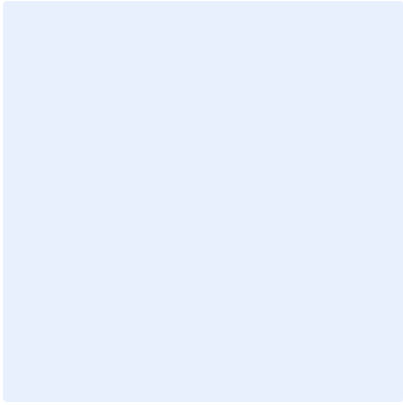
INSIDE CLASSROOM IN SESSION PICTURE



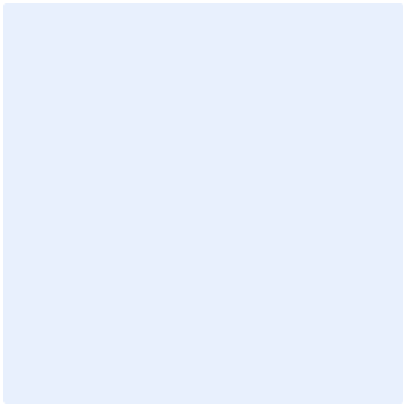
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OUTSIDE BUILDING PICTURE



INSIDE COMPUTER LAB PICTURE



INSIDE OFFICE IMAGE

