

Justice Training Institute

Training for Performance Excellence



Register Now!

4 Camp Road, Kingston 4



876-928-4624



justicetraining@moj.gov.jm



www.jti.edu.jm

APPLICATION FOR ADMISSION

INSTRUCTIONS: - A non-refundable processing fee of \$1000 must accompany this application - Print clearly using INK and BLOCK LETTERS (do <u>not</u> write in pencil) - Answer ALL questions - Tick (☒) boxes, where appropriate - Incomplete applications will not be considered - Submit two (2) passport size photos [<u>not</u> more than six (6) months old] - Submit completed application form and required documents to the JTI * Required documents: Birth Certificate, Marriage Certificate, Exam Certificate(s), Other	FOR OFFICIAL USE ONLY	
	STUDENT ID #:	
	Tax Registration No: _____	

SECTION A: PROGRAMME/COURSE INFORMATION			
1. PROGRAMME/COURSE APPLYING FOR:			
2. ACADEMIC YEAR:		3. Attendance/ Modality:	☐ Day ☐ Evening ☐ Online ☐ Mixed

SECTION B: PERSONAL INFORMATION			
4. LAST NAME:			5. MAIDEN NAME:
6. FIRST NAME:	7. MIDDLE NAME:	8. PREFIX: (MR, MRS, MISS, ETC.)	
9. BIRTH DATE:	month day year	10. GENDER:	☐ Male ☐ Female
11. MARITAL STATUS:		12. MARITAL STATUS DATE:	
☐ Single ☐ Married ☐ Divorced ☐ Widowed ☐ Other _____			

13. RESIDENTIAL ADDRESS:		14. MAILING ADDRESS:	
15. PHONE No. #1:		16. PHONE No. #2:	
18. EMAIL ADDRESS:		17. WHATSAPP TELE #:	
19. COUNTRY OF BIRTH:		20. NATIONALITY:	

SECTION C: PREVIOUS ATTENDANCE AT JTI

21. Have you previously been a student at the JTI? ☐ YES ☐ NO	If YES, please state:	22. PROGRAMME/COURSE:	FROM: MONTH & YEAR	TO: MONTH & YEAR

SECTION D: EMERGENCY CONTACT INFORMATION

IDENTIFY PERSONS TO BE CONTACTED IN CASE OF EMERGENCY. IF POSSIBLE, AT LEAST ONE CONTACT SHOULD BE LOCATED IN JAMAICA.

23. PRIMARY CONTACT NAME:	24. RELATIONSHIP TO APPLICANT:
25. ADDRESS:	26. PHONE NO.:
27. SECONDARY CONTACT NAME:	28. RELATIONSHIP TO APPLICANT:
29. ADDRESS:	30. PHONE NO.:

SECTION E: EDUCATION

31. Enter details of any professional and qualifications, such as degrees, certificates and diplomas; whether at tertiary, secondary, vocational or technical level. For each subject entered, insert either grade or proficiency level.

INSTITUTION	DATE ATTENDED		QUALIFICATION ATTAINED / EXAMINATION TYPE (DEGREE, DIPLOMA, CERTIFICATE, CXC, GCE, ETC.)	SUBJECT	GRADE / PROFICIENCY	YEAR OF AWARD
	FROM: MONTH & YEAR	TO: MONTH & YEAR				

SECTION F: SKILLS & SPECIAL ABILITIES

32. Indicate any expertise you have in specialized areas e.g. Computing, Communicating, Organizing

SKILL	YEAR ACQUIRED	PROFICIENCY LEVEL (TICK)		
		HIGH	MEDIUM	LOW

SECTION G: CURRENT EMPLOYMENT INFORMATION

33. ORGANIZATION/ENTITY:			
34. ADDRESS:			
35. JOB TITLE:		36. TOTAL YEARS WITH ENTITY:	

SECTION H: REFEREE INFORMATION

YOU MUST PROVIDE THE NAMES OF TWO (2) REFEREES, ONE OF WHOM SHOULD BE A MEMBER OF YOUR PRESENT ORGANIZATION/ENTITY.

37. NAME (REFEREE #1):	38. INSTITUTION/ORGANIZATION:	39. JOB TITLE:
40. ADDRESS:		43. REFERENCE TYPE: PROFESSIONAL ☐ PERSONAL ☐ BOTH ☐
41. PHONE:	42. EMAIL:	
44. NAME (REFEREE #2):	45. INSTITUTION/ORGANIZATION:	46. JOB TITLE:

47. ADDRESS:		50. REFERENCE TYPE: PROFESSIONAL ☐ PERSONAL ☐ BOTH ☐
48. PHONE:	49. EMAIL:	

SECTION I: FEE PAYMENT

51. WHO WILL BE RESPONSIBLE FOR THE PAYMENT OF YOUR FEES? ☐ SELF ☐ SPONSOR/ENTITY		
IF SPONSORED, PLEASE HAVE THE RESPONSIBLE OFFICER COMPLETE THE SECTION BELOW:		
52. NAME OF SPONSOR/ENTITY:		
53. ADDRESS OF SPONSOR:		
54. NAME OF AUTHORIZING OFFICER OF THE SPONSOR:		58. OFFICIAL STAMP OF SPONSOR/ENTITY
55. POSITION OF AUTHORIZING OFFICER:		STAMP
56. SIGNATURE OF AUTHORIZING OFFICER:		
57. DATE SIGNED:		

SECTION J: PUBLIC RELATIONS & REACH

59. HOW DID YOU FIRST HEAR ABOUT JTI?					
☐ Newspaper	☐ Television	☐ Radio	☐ Brochure	☐ Website	
☐ Employer	☐ Word of Mouth	☐ Other (please specify): _____			
60. HOW DID YOU HEAR ABOUT THE PROGRAMME FOR WHICH YOU ARE APPLYING?					
☐ Newspaper	☐ Television	☐ Radio	☐ Brochure	☐ Website	
☐ Employer	☐ Word of Mouth	☐ Other (please specify): _____			

SECTION K: DECLARATION AND SIGNATURE

I declare that the particulars in this application are true to the best of my knowledge and belief and that I am aware that failure to provide true and accurate information may make me ineligible for admission and enrolment or continuation of studies.

Applicant's Signature: _____

Date: _____

N.B. The submission of a completed application does not guarantee a place.

FOR OFFICIAL USE ONLY

PROCESSING FEE PAID ☐

RECEIPT #: _____

RECEIPT DATE: _____

CERTIFIED DOCUMENTS ATTACHED:

☐

BIRTH CERTIFICATE

☐

TWO (2) PASSPORT SIZE PHOTOS

☐

MARRIAGE CERTIFICATE

☐

DOCUMENT CONFIRMING NAME CHANGE

☐

EXAM CERTIFICATE X _____

☐

OTHER: _____

REMARKS:

SUCCESS AT:

INTERVIEW: ☐

ENTRANCE EXAM ☐

SKILLS TEST ☐

☐ OTHER: _____

STATUS:

ACCEPTED: ☐

NOT ACCEPTED: ☐

☐ PENDING: _____

NAME OF JTI OFFICIAL:

SIGNATURE: