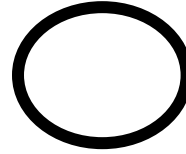


# BUAN

BOTSWANA UNIVERSITY OF  
AGRICULTURE AND NATURAL RESOURCES



## REGISTRATION FORM

### 1. PERSONAL DETAILS

(a) Surname ..... First Name .....

Gender ..... ID NO/PASSPORT .....

(b) P/Address .....

Phone (Land Line) ..... Mobile .....

E-mail address .....

### 2. COURSE DETAILS

(a) Course applied for .....

(b) Scheduled date .....

### 3. BUSINESS INFORMATION

(a) Are you already in the business which is related to above course?  Yes  No

(b) Size of the enterprise/business: Small scale?.....Medium?.....Large?.....

### 4. MOTIVATION

Briefly explain why you are attending this course

.....  
.....

### 5. ACCOMMODATION

Will you need accommodation?  Yes  No

### 6. SPECIAL DIET

Any special dietary requirements (Specify)

.....

7. SIGNATURE OF APPLICANT: .....

**NB: USE THE ACCOUNT DETAILS BELOW FOR PAYMENTS:**

**STANDARD CHARTERED BANK**

**MALL BRANCH CODE: 66-21-67**

**ACCOUNT NO: 0100150424100**

**SWIFT CODE: SHBBWGX 021**

**PAYMENTS SHOULD BE DONE TWO WEEKS BEFORE THE COMMENCEMENT OF THE COURSE.**