

STUDENT ADMISSION FORM

For Building Low Voltage System Design & Drafting Course

1. Pe	ersonal Information
•	First Name:
	Middle Name:
	Last Name:
	Full Name:
	Date of Birth (M/D/YYYY):
•	Gender: ☐ Male ☐ Female ☐ Other
•	Nationality:
•	ID/Passport Number:
2. Co	ontact Details
•	Address:
	City: State:
•	Country: Zip Code:
•	Mobile Number:
	WhatsApp:
•	Email Address:



. Educational Background	
Highest Qualification:	
\square High School \square Diploma \square Bachelor's \square Master's \square Other	
• Field of Study:	
• Institution/University:	
Year of Completion:	
4. Professional Information (if applicable)	
Current Employer/Organization:	
Designation/Job Title:	
Work Experience (Years):	
Relevant Experience in MEP (Yes/No):	
5. Course Enrollment Details	
Building Low Voltage System Design & Drafting:	
Mode of Learning	
(Please tick the Course Details)	
 □ Online Training 	
□ Hybrid Training	
• □ Self Study	
□ Classroom Training	
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Preferred	l Batch Timing:
(Please ti	ck the Batch Timing)
• 🗆	Weekdays (Morning)
• 🗆	Weekdays (Evening)
• 🗆	Weekends (Morning)
• 🗆	Weekends (Evening)
	Weekends (Morning & Evening) uration 8 – 16 Weeks (Based on selected track)
5. Skills 8	& Learning Objectives
• Wh	nat are your main goals in taking this course?
	Career Advancement
	Skill Upgrade / Professional Development
	Academic Knowledge Support
□.	Transitioning into MEP / HVAC Industry
	Other:
• Ple	ease describe briefly why you are interested in joining this program:
6. Suppoi	rting Documents (To be Attached)
• 🗆	Copy of Passport / National ID
• 🗆	Copy of Latest Educational Qualification Certificate
• 🗆	Updated CV / Resume
• 🗆	Passport-size Photograph (Recent)
7. Payme	nt & Fee Details
-	urse Fee: USD
• Mc	ode of Payment: Bank Transfer Credit/Debit Card PayPal Cash
• Pay	yment Status: ☐ Paid ☐ Pending ☐ Installments Requested
-	nsaction / Reference Number:

info@mep.education / www.mep.education 14350. Mundy Drive, Noblesville, IN. 46060. USA / +1 77.8074222



8. Terms & Conditions

- 1. All fees once paid are non-refundable.
- 2. Admission will be confirmed only after verification of documents and full or partial payment.
- 3. The institution reserves the right to change class schedules, trainers, or training platforms if required.
- 4. Participants must maintain discipline and adhere to professional ethics during the course.
- 5. Certificate will be awarded only upon successful completion of assignments, projects, and final assessment.

I hereby declare that the information provided above is true to the best of my				
knowledge. I agree to abide by the rules and regulations of the instit	ution.			
Signature of Applicant:				
Date: /				
6. Emergency Contact				
• Name:				
Relationship:				
Contact Number:				
7. For Office Use Only				
Admission Number:				
Course Enrolled:				
Batch/Session:				
 Fees Paid: ☐ Yes ☐ No 				
Payment Reference No:				
Admission Approved By:				
Date of Admission:				