

REGISTRATION FOR FROSIO NS 476 CERTIFICATE

USE CAPITAL LETTERS

TICK: Ordinary Exam <input type="checkbox"/> Re-Exam Theoretical <input type="checkbox"/> Re-Exam Practical <input type="checkbox"/> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> CERTIFICATE NUMBER <input style="width: 100px; height: 20px;" type="text"/> </div> <div style="text-align: center;"> FROSIO ID NUMBER: <input style="width: 100px; height: 20px;" type="text"/> </div> </div>	PASSPORT PHOTO GLUE HERE	STATEMENT I HEREBY DECLARE AND CONFIRM THAT: <ul style="list-style-type: none"> CONFIDENTIAL EXAM PAPERS ARE NOT COMMUNICATED TO THIRD PERSON THERE IS NO ATTEMPT OF CHEATING ON THE EXAMINATION _____ SIGNATURE					
GIVEN NAME:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">ORDINARY EXAM:</td> <td colspan="2" style="text-align: center;">RE-EXAM:</td> </tr> <tr> <td>EXAM NO:</td> <td style="width:30%;">RE-EXAM 1:</td> <td style="width:30%;">RE-EXAM 2:</td> </tr> </table>	ORDINARY EXAM:	RE-EXAM:		EXAM NO:	RE-EXAM 1:	RE-EXAM 2:
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SURNAME:	DATE OF EXAM:						
DATE OF BIRTH (DD/MM/YY):	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">TRAINING BODY:</td> <td style="width:50%;">CANDIDATE NO:</td> </tr> </table>	TRAINING BODY:	CANDIDATE NO:				
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PRIVATE ADDRESS:	<u>FOR FROSIO SECRETARIAT ONLY:</u> NOTES:						
ZIP/POSTAL CODE AND CITY:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">POINTS THEORY:</td> <td style="width:50%;">POINTS PRACTICAL:</td> </tr> </table>	POINTS THEORY:	POINTS PRACTICAL:				
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COUNTRY:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">POINTS THEORY:</td> <td style="width:50%;">POINTS PRACTICAL</td> </tr> <tr> <td>RE-EXAM 1:</td> <td>RE-EXAM 1:</td> </tr> </table>	POINTS THEORY:	POINTS PRACTICAL	RE-EXAM 1:	RE-EXAM 1:		
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RE-EXAM 2:	RE-EXAM 2:						
E-MAIL (PERSONAL):	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">YEAR- RELEVANT WORK:</td> <td style="width:50%;">YEARS-INSPECTIONS EXPERIENCE:</td> </tr> </table>	YEAR- RELEVANT WORK:	YEARS-INSPECTIONS EXPERIENCE:				
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COMPANY (EMPLOYER):	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center;">CERTIFYING LEVELS:</td> </tr> <tr> <td style="width:33%; text-align: center;">LEVEL - III</td> <td style="width:33%; text-align: center;">LEVEL II</td> <td style="width:33%; text-align: center;">LEVEL I</td> </tr> </table>	CERTIFYING LEVELS:			LEVEL - III	LEVEL II	LEVEL I
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COUNTRY:							
CERTIFICATE SHALL BE SENT TO (PLEASE TICK): PRIVATE: <input type="checkbox"/> COMPANY: <input type="checkbox"/>	THE APPLICANT HAS THE OPPORTUNITY, WITHIN REASON, TO REQUEST ACCOMODATION FOR SPECIAL NEEDS						