



APEL.C APPLICATION FORM FOR LEARNERS

(This form is required to be submitted to the CAC Office immediately upon payment of the fee.)

Name	
Identity Card No./ Passport No.	
Name of Programme	
Course Code & Course Name	
No. of Credits of the Course	
Mode of Assessment Chosen	<input type="checkbox"/> Challenge Test <input type="checkbox"/> Portfolio Submission
Confirmation of APEL.C Advisor	I hereby confirm that the above learner has been advised and is deemed eligible for the APEL(C) assessment. Signature: Name of Advisor: Date:

I hereby:

- a. declare that I have read and understood all the terms and conditions stipulated under the provision of APEL (C) of City U; and
- b. declare that all the information/documents provided to support this application are authentic, true, and accurate.

I fully understand that the City University reserves the right to reject my application if proven otherwise.

I also agree with the mode of assessment recommended by the APEL.C Advisor.

Signature	
Name	
Date	