



CVTC
CLOCKNET VOCATIONAL TRAINING CENTRE
Building Skills, Transforming Lives

ACADEMIC YEAR APPLIED FOR:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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PASSPORT PHOTO
OF APPLICANT

*(Compulsory- please
attach recent
passport photo of
yourself)*

**REGISTERED WITH NAMIBIA TRAINING AUTHORITY (NTA) &
ACCREDITED BY NAMIBIA QUALIFICATIONS AUTHORITY (NQA)**

Note

The applicant will be required to complete the Application Form, and return it to Clocknet Vocational Training Centre.

Documents to be submitted with Application Form:

- ID Document - certified copy or
- Passport - certified copy
- School Leaving Certificate - certified copy
- Proof of Application Fee

Application Fees (Non-refundable)

The following must be paid through CVTC Bank Account **(Please attach proof of payment to application form)**

Application Fees: N\$150.00

Late Application fee: N\$ 250.00

Due Date for Applications: 30th October 2025

Due Date for late Application: 28th February 2026

Bank Account Details Clocknet Vocational Training Centre

Bank Windhoek, Account NO: 8034825037

Branch: Maerua Mall

SECTION 1: PROPOSED COURSE OF STUDY

First Choice (1):	
Second Choice (2):	

(Mark appropriate box with an 'X') (Distance applicable for Office Administration Only)

Windhoek Campus	Full time	<input type="checkbox"/>	Part time	<input type="checkbox"/>	Distance	<input type="checkbox"/>
Okahao Campus	Full time	<input type="checkbox"/>	Part time	<input type="checkbox"/>		<input type="checkbox"/>

SECTION 2: APPLICANT'S PARTICULARS

Title:	Mr. <input type="checkbox"/>	Ms. <input type="checkbox"/>	Other (Specify) <input type="text"/>
Surname:	<input type="text"/>		
First Name (s) in full:	<input type="text"/>		Initials <input type="text"/>

SECTION 3: CONTACT PARTICULARS FOR APPLICANT

POSTAL ADDRESS:	RESIDENTIAL ADDRESS:
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Tell No: <input type="text"/>	<input type="text"/>
Cell No: <input type="text"/>	<input type="text"/>
E-mail: <input type="text"/>	<input type="text"/>

SECTION 4: PERSONAL PARTICULARS

Date of Birth:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	I.D. No	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Marital Status:	Single: <input type="checkbox"/>	Married <input type="checkbox"/>	Other (specify) <input type="text"/>																
Gender:	M <input type="checkbox"/>	F <input type="checkbox"/>	Maiden Name: <input type="text"/>																
Home Language:	<input type="text"/>								Home Town:	<input type="text"/>									

Choose the appropriate region of origin below: (Namibian nationals only)

Khomas	Omaheke	Kavango West	Omusati	Kunene	Ohangwena	Kunene
Erongo	Karas	Kavango East	Oshana	Zambezi	Otjozondjupa	Oshikoto

If not a Namibian citizen, please provide the following details:

Country of Origin	Passport Number	Expiry Date
Type of Permit	Permit Number	Expiry Date

SECTION 5: EMPLOYMENT PARTICULARS (only if applicant is in full-time employment)

Name of Employer:	
Your Occupation:	
Employer's Postal Address:	
Employer's Telephone No.:	

SECTION 6: APPLICANT'S NEXT OF KIN/LEGAL GUARDIAN PARTICULARS

Family relationship with the person whose particulars are supplied.

Father	Mother	Spouse/partner	Guardian
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Title:	Mr.	Ms.	Other (<i>specify</i>):
Surname:			
First Names in full:			Initials:
Home Address (next of kin/guardian):			
Tel No. (Work):			
Tel. No. (Home):			
Occupation:	Employer's Address:		
Mobile Number:	E-mail:		

SECTION 7: SCHOOL LEAVING PARTICULARS

List 6 of your best subjects including English
(5 best and the 6th should be English)

Last secondary school attended:			
Address of school:			
Highest grade passed:	Grade		
Subject	Level	Symbol	

FOR OFFICIAL USE ONLY:

Accepted for first choice (1)		Accepted for second choice (2)		Incomplete		Rejected	
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Notes:

FOR OFFICIAL USE ONLY:

APPLICATION RECEIVED BY: _____

RECEIPT NUMBER : _____

Official Stamp

Application Form Proof of Submission

Full Name:

Received by:

Date received:

Signature:

Official Stamp