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REQUEST FOR THE ACCREDITATION STATUS OF AN INSTITUTION

Please complete this form by providing clear details of your personal information and enquiry.

PERSONAL DETAILS

Full Names and Title	
Postal Address	
Telephone number, town code or Cell number	
Fax number and town code	
E-mail address	
Preferred method of response	

DETAILS OF THE ENQUIRY

Full name of the institution and country in which institution is based (e.g. University of Pretoria in South Africa)	
Full name of the qualification you would want to study towards (e.g. Diploma in Local Government Studies, Bachelor I Computer Science or Masters in Education)	
What is the purpose of this information?	
What have you already done to find out about this institution?	

Please attach proof of admission and a copy of your Identity Document.

Signed: _____ Date: _____

FOR OFFICE USE ONLY

Date of Response	Post: _____
	Fax: _____
	Email: _____

Please note that this is an advisory service for the prospective learners and not for institutions to market their services.