



PROFESSIONAL DEVELOPMENT

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Application Form

Course Title: _____

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Payment Options

1. By cheque - payable to Malta University Consulting Ltd to the below address

2. By cash – At below address (opposite NSTS) between 8.30am and 3.30pm (Mon to Fri)
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3. By Bank Transfer

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Bank's BIC: VALLMTMT

Signature: _____ Date: _____

Should you have any queries or require any further information, kindly contact:

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Tel: 21248218 or by e-mail: joanna.hauge@muhc.com.mt