

Zimbabwe Institute of Management  
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**ZIMBABWE INSTITUTE  
 OF MANAGEMENT**

Est 1957

Zimbabwe Institute of Management  
 29 A. George Silundika Street  
 Between First & Second Avenue  
 Bulawayo

Landline: (09) 881163 / 72497  
 Cell: 0772 271 145  
 Email:marketing@zimbyo.co.zw

visit our website: [www.zim.ac.zw](http://www.zim.ac.zw). or Facebook: Zimbabwe Institute of Management

## GENERAL INFORMATION

Program applied for\*

- |                               |                                  |                                   |                                     |
|-------------------------------|----------------------------------|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> EDBL | <input type="checkbox"/> EDAS    | <input type="checkbox"/> EDOM     | <input type="checkbox"/> EHSM cert  |
| <input type="checkbox"/> EDGM | <input type="checkbox"/> ERM     | <input type="checkbox"/> MRM cert | <input type="checkbox"/> EHSM dip 1 |
| <input type="checkbox"/> CTLM | <input type="checkbox"/> DTLM    | <input type="checkbox"/> MRM dip  | <input type="checkbox"/> EHSM dip 2 |
| <input type="checkbox"/> EDSM | <input type="checkbox"/> EHSM Ad | Other                             |                                     |

First Names:

 Mr.  Mrs.  Ms.  Miss.  Dr.

Title:

Surname:

Marital Status:

Date of Birth:

National Identification Number:

Present Employer:

Position Held:

Work Address:

Email Address:

Contact Details:

Cellphone

Business

Postal Address

Physical Address

Province

Highest Academic Qualification:

Professional Qualification:

Next of Kin/Guardian: Name

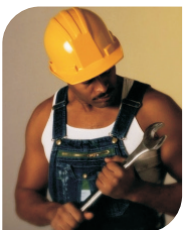
Relationship

Cellphone

Physical Address

Type of Membership (Please tick):

- |                                  |                                    |                               |
|----------------------------------|------------------------------------|-------------------------------|
| <input type="checkbox"/> Student | <input type="checkbox"/> Associate | <input type="checkbox"/> Full |
| <input type="checkbox"/> Fellow  | <input type="checkbox"/> Corporate | <input type="checkbox"/>      |



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# PLEASE READ CAREFULLY BEFORE COMPLETING THE APPLICATION FORM

## PAYMENT OF FEES

Fees are payable each month for the duration of the course.

## BOOKINGS

1. **Booking Authority**.....
2. Provisional bookings may be made by telephone but they can only be considered to be confirmed when:
  - (a) The registration form has been received and course fees have been paid.
  - Or (b) Course fees have been received.
3. Cancellations/postponement notice received in writing between 21 and 30 days before the commencement of the course will be subject to a cancellation/postponement fee of 10%; if received between 14 and 20 days before the commencement of the course, 50% of the fee will be payable.
4. Fees are subject to increase **without** notice and delegates who pay in advance will be required to top up on their payment in the event **of fee** increases.
5. Cancellations/postponement notices received in writing up to 13 days before the commencement of the course, and failure to attend the course, attract the total course fee.
6. Transfers will not be possible.
7. Interest on all overdue accounts will be levied at the rates ruling at the time.
8. You are required to pay your tuition before attending any training, or if not, produce a letter of consent from accounts to attend lessons.
9. The person responsible for payment shall be liable in the event that the student defaults on payment of fees
10. Fees to be paid in full even if you don't complete the program

Signature of delegate: ..... Date: .....

Sponsored  Self Sponsored  please tick one.

Name of Sponsor..... Physical Address..... Cellphone.....

Weekend classes  
(Sat,Sun)  
Lessons begin 8:30 – 4:00pm

Weekend classes  
(Fri,Sat,Sun)  
Lessons begin 8:30 – 4:00pm

**Banking Details:**  
**Account Name: Zimbabwe Institute of Management**  
**Bank: Standard Chartered**  
**A/c No. 8700216570400**  
**Branch: Highlands**

**\*P/S Please note that you will be invoiced for attendance of each module (and be expected to make payment) unless the Zimbabwe Institute of Management's cancellation/postponement policy as spelt above has been adhered to.**

## FOR OFFICIAL USE ONLY

|                                 | Amount US\$                               | Receipt #                                 | Date                                      |
|---------------------------------|---|---|---|
| Registration Fee                | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> |
| Training Fee Paid               | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> |
| Soft Copy Modules (CD) Fee Paid | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> |
| Student Number                  | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> |
|                                 | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> |

Signed Registrar:.....

Signed: Finance:.....

Date:.....

Date:.....