



HAQUE EDUCATIONAL & WELFARE TRUST

®

HAQUE VOCATIONAL CENTRE

REGISTRATION FORM

Reg #. _____

COURSE TYPE: _____

Name: _____

Son/Daughter/Wife of: _____

Education: _____

CNIC #: _____

Profession: _____

Contact #: _____

Address: _____

Note: I _____ agree that in case of any violation of rules framed by Haque Vocational Centre. The centre can cancel/terminate my admission at any time.

Signature: _____

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For Office Use Only

Approved/Not Approved

Course Type: _____ Course Duration: _____

Dated: _____

Counter Signed
General Secretary HEWT



HAQUE EDUCATIONAL & WELFARE TRUST

®

(VOLUNTEER FORM)

PERSONAL DETAILS

Name: _____ Father's Name: _____
CNIC No: _____ DOB: _____
Qualification: _____ Profession: _____
Professional Experience: _____
Residential Address: _____
Tel #: _____ Cell No: _____ E-mail: _____

HOW WOULD YOU LIKE TO help as VOLUNTEER

Date : _____
Signature

.....

OFFICE USE ONLY

Date of Registration: _____ Registration No: _____

Signature of Admin

Haque Computer Centre

Following Computer Courses are currently
Being Offered.

- 1) MS Office (MSWord, Power Point, Excel) (**Duration 1 month**)
- 2) Basic Computer Fundamentals. (**Duration 1 Month**)
- 3) Desktop Publishing (Computer Introduction, MS-Word, Excel, Power Point, Windows, Internet and Access). (**Duration 2 months**)

Timings: Saturday (3pm – 7pm)

Sunday (3pm - 7pm)

Note: For Registration/Tining and Availability of Class Please Contact us in Office Hours.