**1. Personal Information**

|  |  |  |  |
| --- | --- | --- | --- |
| First Name: |  | Last Name: |  |
| Gender(Optional):  |  |  |  |
| Address:  |  | Apt/unit #:  |  |
| City:  |  | State: |  |
| Zip code:  |  |  |  |
| Contact Information:  |  |  |  |
| Cell phone:  |  | E-mail: |  |

**2. Educational Background**

High school Completed? [Yes] | [No]

College/University Graduated? [Yes] | [No]

(Fill last twoHigher Education information if you are a college /university graduate):

|  |  |  |  |
| --- | --- | --- | --- |
| Degree (M.Sc., B.Sc.,Diploma etc.) | Graduation Year | Field/Department | University/College where degree was granted |
|  |  |  |  |
|  |  |  |  |

**3. Computer Skills**

|  |  |  |  |
| --- | --- | --- | --- |
|  Skill Name/Type | Trained (Yes/No) | Professional Experience (Yes/No) | Level of proficiency (basic, medium, expert) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**4. Program Enrolling For:** MS SQL Developer (DBA), BI and Data Analytics

**5. Payment plan Choose One (X)**

|  |  |  |
| --- | --- | --- |
|  | Plan 1 [ ] | Plan 2 [ ] |
| Program Fee | 2500.00 | 2500.00 |
| Registration Fee | 0.00 | 0.00 |
| Promo Discount | 300.00 | 300.00 |
| Payment Installment | Pay in full at the beginning |  Pay in two installments \* |
| Discount | 200.00 | 0.00 |
| Total (Program Fee- Discounts)  | 2000.00 | 2200.00 |

\* Payment in two installments means half payment during registration and half in one month

Please select your payment mode:

Cash[ ] Paypal [ ] Check [ ] Debit [ ] Credit [ ]

**6. Mode of Instruction/ Mentorship**

This Program is intended to be offered every Saturday and Sunday online with an onsite support every other week.

**7. Trainee Check List**

**Please initial below (with first three letters of your name)** (TTI means Targeted Technology Institute)

 I have read the description of the course and I understand my participation in it.

 I understand I am to furnish my own transportation to and from the learning site.

 I have read and understand that any resources from TTI should not be shared for any commercial purpose without a written consent of the company.

By signing below electronically and sending to TTI with email, I, , in consideration of the opportunity to participate in a course offered by TTI, of the fulfillment of the requirements for the program named above acknowledge that TTI will not be responsible for any personal injury, including death, to me or damage to my property. I agree to abide by all regulations, policies, agreements and procedures of TTI and of any entity where I participate in the course program.

I acknowledge that the learning experience in the above-named program does not create an employment

/employer or independent contractor relationship with TTI or with any entity where I am placed and that I will not claim entitlement to any wages, benefits, workers' compensation, or any other form of payment.

I acknowledge that participation in the learning and mentorship program is wholly voluntarily.

I agree to pay the program fee as the choice I made above.

I agreed that the course fee will not be refunded incase of terminating the training by my own reason. I will forfeit the course fee should I fail to attend. This agreement shall be construed under the laws of the State of Maryland without regard to its conflict of law provisions and jurisdiction and venue will be in Montgomery County, MD. I have read this document before signing it and I sign this document of my own free act and deed, intending to be bound by the promises I have made herein.

|  |  |
| --- | --- |
| Trainee Signature (print full name)  | Date:  |

**8. FOR OFFICE USE ONLY**

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Evaluated by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_