



Application for Course Supervision

Institute Reference Number:

Institute Details:

Name of Institute:

D.H.E Registration No.: Type:

Campus Details:

Name of the Campus: Contact:

Address: Atoll: Island:

Programme Details:

Name of the Programme:

Date of Programme Approval / Accreditation: MNQF level:

Delivery and Teaching:

Modality:

Full - Time Part - Time Face to Face Distance / Online

Programme Duration:

Duration : Started Date: / / 20..... Completed Date: / / 20.....

Batch Details:

Batch Number : No. of Students Enrolled: No. of Students Completed:

Assesment Details:

Number of :
Theory Exams : Practical Exams : Assignments : Projects :

Contact Hours:

In a week how many days classes are conducted?

Per day how long classes are conducted?

Assesment methods with allocated marks / grade:

.....
.....

Student(s) Details:

#	Student Name	Permanent Address	National ID Card or PP No.	Age	Gender	Contact Number	Highest Qualification	Percentage of Attendance

(Attach Students Details list as shown above)

