



Application Form for Second Copy of a Validated Qualification

Applicant's Information

Full Name: ID Card No:
 Permanent Address:
 Current Address:
 D.O.B:/...../..... Mobile No: E-mail:

Certificate Details (must not be a provisional certificate)

Name of the Certificate:
 No. of copies needed to stamp: Date or year of the 1st validation:/...../.....

Certificate Level: (put a tick where appropriate.)

Level 1	<input type="checkbox"/>	Certificate 1	Level 7	<input type="checkbox"/>	Bachelor's Degree	
Level 2	<input type="checkbox"/>	Certificate 2		<input type="checkbox"/>	Professional Certificate	
Level 3	<input type="checkbox"/>	Certificate 3		<input type="checkbox"/>	Professional Diploma	
Level 4	<input type="checkbox"/>	Certificate 4		<input type="checkbox"/>	Bachelor's Degree with Honours (480 Credits)	
	<input type="checkbox"/>	Advanced Certificate	Level 8	<input type="checkbox"/>	Graduate / Postgraduate Diploma	
Level 5	<input type="checkbox"/>	Diploma		<input type="checkbox"/>	Graduate / Postgraduate Certificate	
Level 6	<input type="checkbox"/>	Associate Degree	Level 9	<input type="checkbox"/>	Master's Degree	
	<input type="checkbox"/>	Professional Certificate		<input type="checkbox"/>	Advanced Professional Diploma	
	<input type="checkbox"/>	Advanced Diploma		<input type="checkbox"/>	Advanced Professional Certificate	
Level 10	<input type="checkbox"/>	Doctoral Degree	<input type="checkbox"/>	Higher Professional Certificate	<input type="checkbox"/>	Higher Professional Diploma

Checklist - Documents to be submitted: (put a tick where appropriate)

- ☐ Copy of the certificate submitted for validation
☐ The original certificate or a copy of the validated certificate
☐ Copy of National Identity Card.

THE ORIGINAL DOCUMENTS WILL BE VERIFIED AND RETURNED AT THE TIME OF SUBMISSION.

PLEASE ENSURE ALL THE REQUIRED DOCUMENTS ARE SUBMITTED.

DECLARATION:

I declare that all the information given in this application form is accurate and all the mentioned documents are submitted. I also declare that the certificate I submitted as supporting documents are genuine certificates I obtained and not forged. I agree to take the full responsibility of all the implications resulting if I submit any forged certificate.

Name: Date:/...../..... Sign:

FOR MQA USE ONLY:

Form received by: Name: Date:/...../..... Sign:

PLEASE SUBMIT THIS FORM ALONG WITH ALL REQUIRED DOCUMENTS TO MQA BETWEEN 8:15 AM AND 12:00PM ON WORKING DAYS

FEE

EACH COPY: MVR 50.00