

## INVIGILATORS' APPLICATION FORM

Applying Learning Centre:

- IUM HA. HDH Learning Centre (H.Dh. Hanimadhoo)
- IUM Faadhippolhu Learning Centre (Lh. Naifaru)
- IUM Hahdhunmathi Learning Centre (L. Fonadhoo)
- IUM Fuvahmulah City Learning Centre (Gn. Fuvahmulah)
- IUM Addu City Learning Centre (S. Meedhoo)

[Please attach a  
passport size  
photo here]

### Personal Information

ID No:	A
Full Name:	
Present Address:	
Permanent Address:	
Date of Birth:	
Age [DDMMYYYY]	
Mobile:	(+960)
Emergency Contact:	(+960)
Email:	
Occupation:	
Bank Account No:	

Please attach a document which can verify the bank account no: (e.g.: deposit slip)

If any relative / close person (indicated below) is sitting in this examination, please tick in the appropriate grid.

- Own Child
- Mother/Father
- Own Brother/Sister
- House Hold Member
- Husband/Wife
- Other (Specify Below)

2024

Do you teach/give tuition to any of the candidate(s) sitting in this examination?

- Yes
- No

Are you a candidate sitting for the examination session?

- Yes
- No

Will you be able to attend all the sessions?

- Yes
- No

If 'No', please mention the reason.

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### Previous Experience

Examination Name	Institute	Invigilated Position	Exam Year

I have given the information required truthfully and accurately to the best of my knowledge.

Signature: ..... Date: .....

- \* Attach a passport size photo of the applicant.
- \* Attach copies of your academic certificate and CV.
- \* Attach bank account verification slip.
- \* Appointees will be informed accordingly.