



Application Form for Certificate Validation / Recognition

(PLEASE FILL A SEPARATE APPLICATION FORM FOR EACH CERTIFICATE TO BE VALIDATED)

Applicant's Information:

Full Name:
 Permanent Address:
 Current Address:
 National ID number / Work Permit Number : Date of Birth:
 Contact No(s): Mobile: E-mail:

Details of the Certificate Submitted for Validation / Recognition: (must not be a provisional certificate)

Name of the Certificate :
 Entry Criteria:
 No. of Credits: No. of Credits studied at the Institute: No. of Credits been exempted*:
 If exempted, the qualification(s) which were considered: (pls Provide evidence of exemption details)
 (1) Qualification name: No. of Credits exempted for this qualification:
 (2) Qualification name: No. of Credits exempted for this qualification:

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 | Level 8 | <input type="checkbox"/> Bachelor's Degree with Honours (4yrs) |
| Level 5 | <input type="checkbox"/> Diploma | | <input type="checkbox"/> Graduate / Postgraduate Diploma |
| Level 6 | <input type="checkbox"/> Associate Degree | Level 9 | <input type="checkbox"/> Graduate / Postgraduate Certificate |
| | <input type="checkbox"/> Foundation Degree | | <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 |

No. Of copies needed to stamp:
 Awarding University / College / Institute: Country:
 University / College / Institute attended : Country:
 Duration of the Course: Date Started: Date Finished :
 Ownership of the Institution attended: Government: Private Government & Private
 Mode of study : On Campus Distance
 Course type : Full time Part time
 Number of hours studied per week :

If a Distance Education Course:

Course structure and the type of Institutional support:
 The method of assessments and examinations:
 Exam supervision body:
 Examination Venue:

Previous Post Secondary/Higher Education Qualifications Attained:

| Name of the Certificate | Studied at (University / college / Institute) | Date Started | Date Finished |
|-------------------------|---|--------------|---------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

Note: Please submit originals and copies of the certificates mentioned here.

* Exemption - example: Total credits for advanced standing

Employment History:

| | | | |
|---------------------|-----------------|---------------------|-------|
| Current job: | Employer: | Date started: | |
| Previous employment | Employer | From | to |
| 1. | | | |
| 2. | | | |
| 3. | | | |

School Education

Last grade completed

| | | | | | | | |
|---------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|
| Grade 5 | <input type="checkbox"/> | Grade 6 | <input type="checkbox"/> | Grade 7 | <input type="checkbox"/> | Grade 8 | <input type="checkbox"/> |
| Grade 9 | <input type="checkbox"/> | Grade 10 | <input type="checkbox"/> | Grade 11 | <input type="checkbox"/> | Grade 12 | <input type="checkbox"/> |

Others:

Name of the school(s) attended.

| | |
|---------|---------|
| 1. | 3. |
| 2. | 4. |

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

- The originals & the copy of the certificate submitted for validation / recognition
- Translation of that certificate, if it is in a language other than English, Arabic OR Dhivehi
- The original and the copy of Transcript / Mark sheet (including semester break down)
- Entry requirement of the course you completed
- Originals and copies of Lower Secondary Certificates and Higher Secondary Certificates **OR**
in case of absence of such documents original and copy of School leaving certificate
- National Identity Card / Work Visa Card
- The originals and copies of previous qualification(s) prior to the certificate submitted
- Documents showing that the Training provider is recognized in the country of study (if it is not in the MQA recognised list)
- Documents showing that the Awarding body is recognized in the country of origin (if it is not in the MQA recognised list)

*** Originals of Certificates, Transcripts and the Identity Card will be returned after checking at the time of submission to MQA**

Please ensure all the required documents are submitted for speedy processing

Declaration:

I declare that all the information given in this application form is accurate and all the mentioned documents are submitted.

Name: Sign: Date:

For Office Use Only:

Form collectors' name :

Collected date: Checked by:

Validation Fee:

Validation Fee: Mrf 100

For each additional copy: Mrf 50

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