



# STUDENT RESIT FORM

College of Health Environmental & Safety Studies

A member of the CHESS Group of Companies

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Website: www.chessgroupitt.com

## **PERSONAL:**

Title: Mr.  Mrs.  Miss.  Ms.  Other \_\_\_\_\_

\_\_\_\_\_  
SURNAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
MIDDLE NAME

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

ID Card/D.P/Passport # \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

dd mm yyyy

GENDER: Male

Female

TRINIDAD & TOBAGO CITIZEN  INTERNATIONAL STUDENT

TELEPHONE \_\_\_\_\_

Day

/ \_\_\_\_\_  
Work

/ \_\_\_\_\_  
Evening

/ \_\_\_\_\_  
Mobile

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

EMERGENCY CONTACT: NAME \_\_\_\_\_ CONTACT NO \_\_\_\_\_

Relationship of Contact to Applicant \_\_\_\_\_

**PROGRAMME:** Please select the Program for which you are applying to Resit:

1.	<b>NEBOSH National General Certificate in Occupational Health and Safety</b>	
2.	<b>NEBOSH Certificate in Fire Safety &amp; Risk Management</b>	
3.	<b>NEBOSH National General Certificate in Construction Safety and Health</b>	
4.	<b>NEBOSH National Level 6 Diploma in Occupational Health and Safety</b>	

**VENUE** (where you previously attended training):

1. San Fernando

2. UWI (St. Augustine)

3. Mayaro

4. Tobago

5. I previously attended training with another NEBOSH Accredited Course Provider

**Programme Semester for which you are to be registered:** \_\_\_\_\_

## RESIT INFORMATION FOR NEBOSH Programmes

No	NEBOSH Qualification	Units
1.	National General Certificate in OHS	NGC 1 <input type="checkbox"/> NGC 2 <input type="checkbox"/> NGC 3 <input type="checkbox"/>
2.	Fire Safety and Risk Management	NGC 1 <input type="checkbox"/> FC 1 <input type="checkbox"/> FC 2 <input type="checkbox"/>
3.	Construction Health and Safety	NGC 1 <input type="checkbox"/> NCC 1 <input type="checkbox"/> NCC 2 <input type="checkbox"/>
4.	National Diploma in OHS – Level 6	Unit A <input type="checkbox"/> Unit B <input type="checkbox"/> Unit C <input type="checkbox"/>

I wish to be registered for: EXAM ONLY  TUITION AND EXAM

**Examination Date:** \_\_\_\_\_

**Candidate Number:** \_\_\_\_\_ (please enter the number assigned by NEBOSH)

1. Previous Examination sitting for which you were registered : \_\_\_\_\_ (month) \_\_\_\_\_ (year)

2. Last date exam was written: \_\_\_\_\_ (month) \_\_\_\_\_ (year)

All students to be registered to re-sit examination units of any NEBOSH Qualification MUST attach a copy of one of the following NEBOSH official documents:

- Last result notification Slip
- Unit Certificates for any successful units
- Admission voucher for the last examination in which you were registered

### PAST EXAMINATION RESULTS

As applicable

No	NEBOSH Qualification	Units- Enter results for only the units in which you were referred			
1.	National General Certificate in OHS	NGC 1	NGC 2	NGC 3	Absent : <input type="checkbox"/>
2.	Fire Safety and Risk Management	NGC 1	FC 1	FC 2	Absent : <input type="checkbox"/>
3.	Construction Health and Safety	NGC 1	NCC 1	NCC 2	Absent : <input type="checkbox"/>
4.	National Diploma in OHS – Level 6	Unit A	Unit B	Unit C	Absent : <input type="checkbox"/>

NB.: Any changes to the above instructions on the units to be registered must be communicated in writing no less than three (3) days before the College's deadline date for payment of registration fee.

Declaration: I confirm to the best of my knowledge, that the information given in this form is accurate

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF COLLEGE OFFICIAL

\_\_\_\_\_  
DATE RECEIVED

#### OFFICIAL USE ONLY

Student ID No # \_\_\_\_\_

Remarks :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_