GOVERNMENT OF SEYCHELLES

MINISTRY OF EDUCATION

PRIVATE EDUCATION AND TRAINING

APPLICATION FORM FOR THE OPERATION OF PRIVATE TECHNICAL AND VOCATIONAL/TERTIARY EDUCATION AND TRAINING

GUIDELINES

Your attention is drawn to:

- Part 3 of Education Act 2004 on Private Educational Institutions
- SI 43 of 2005 – Education (Private Educational Institutions) Regulations, 2005.
- School Facilities by Unit of Room Size per Existing Norm of 2013 (Revised in 2016 and 2020)

NOTE

i. To avoid processing delays, please provide **all** the relevant information requested.

ii. Upon receipt of the ***Letter of Acceptance of Application***, please submit the amount indicated in the letter either by:
   a. Cash, or
   b. Bank transfer to the account of Government 14-01.

FOR OFFICIAL USE ONLY

- Name of Education & Training Provider: ……..
- Application Form forwarded on: ……
- Application Form Received on: …… by: ……
- Letter of Acknowledgement/Acceptance/Non-Acceptance of Application forwarded on: ……
- Letter of Approval to Operate a Private Educational Provider forwarded on: ……
- Payment made on: …… by: Cash/Cheque/Bank Transfer
- Certificate Issued on: …… Certificate No. ……

Amended: September 2023

Contents

Annexes

Definitions

"Tertiary education" means learning programmes or courses provided by tertiary education and training providers leading to qualifications or part qualifications from level 3 to level 10 of the National Qualifications Framework.

Tertiary Education Act (2011)

"Tertiary education and training provider" means an entity that provides or organises a programme or course of tertiary education and training including the provision of professional development services.

SQA Act (2021)

Section A: Ownership, Administration and Management of a Technical and Vocational/Tertiary Education & Training Provider

A1 **Business Name of the Education and Training Provider**

A2 **Location and Full Address of the Education and Training Provider** (include phone and email where applicable)

Address:

Telephone: **Email:**

A3 **Business Proprietor** (Tick appropriately) Individual ☐ Company ☐ Body Corporate ☐

A3.1 If you have ticked ☐ ✓ the **individual box**, please complete A3.1.1

A3.1.1 **Name:**

NIN: | | | | - | | | | | - | | - | | - | | |

Address:

Telephone: **Email:**

A3.2 If you have ticked ☐ ✓ the **Company box**, please complete A3.2.1 and A3.2.2

A3.2.1 **Registered Name and Full Address of the Company (include phone/email where applicable)**

Registered Name of Company:

Registration Number: **Year of Registration:**

Telephone: **Email:**

A3.2.2 Name, Address, Profession and Nationality of Directors of the Company

Name of Company Director 1:

NIN: | | | | - | | | | | - | | - | | - | | |

Address:

Profession: **Nationality:**

Name of Company Director 2:

NIN: | | | | - | | | | | - | | - | | - | | |

Address:

Profession: **Nationality:**

Name of Company Director 3:

NIN: | | | | - | | | | | - | | - | | - | | |

Address:

Profession: **Nationality:**

Please, complete a separate page if there are more than 3 Company Directors.

A3.3 If you have ticked [✓] the **Body Corporate box,** please complete A3.3.1

A3.3.1 Registered Name of the Body Corporate:

Registration Number: **Year of Registration:**

Telephone: **Email:**

A3.2.2 Name, Address, Profession and Nationality of Members of the Body Corporate

Name of Body Corporate Member 1:

NIN: | | | | - | | | | | - | | - | | - | | |

Address:

Profession: **Nationality:**

Name of Body Corporate Member 2:

NIN: | | | | - | | | | | - | | - | | - | | |

Address:

Profession: **Nationality:**

Name of Body Corporate Member 3:

NIN: | | | | - | | | | | - | | - | | - | | |

Address:

Profession: **Nationality:**

Please, complete a separate page if there are more than 3 members of the Body Corporate.

A4. Name, Photo, Address, Profession and Nationality of the Person responsible for the Daily Operation of the Education and Training Provider

A4.1.1 Name:

Affix Passport Photo Here

NIN: | | | | - | | | | | - | | - | | - | | |

Address:

Telephone: **Email:**

Section B: Education and Training Provision

B1 Tick, as appropriate, the category of Education and Training Services you are providing and intend to provide.

Category of Education & Training Services	Being Provided	Intend to Provide this Year
1. Technical and Vocational Education and Training (Tertiary but not institution-based)		
2. Tertiary Education and Training (Institution-based, i.e. Professional Centres and Universities)		

Section C: Information Related to Specific Tertiary Education/Training Services

C1 Area of Specialisation (if any):

C2 Operating Calendar/Schedule

C2.1 Mode of Operation (Tick appropriately) Full-Time ☐ Part-Time ☐

C2.1.1 Daily Operation: (i) No. of Hours ☐

(ii) Time of Daily Operation from ☐ to ☐

C2.1.2 Weekly Operation: No of Days ☐ No. of Hours ☐

C2.1.3 Yearly Operation No of Weeks ☐ No. of Months ☐

a) **Additional Relevant Information**

C2.2 Holiday /Vacation Schedule (Excluding National Holidays)

Period	Duration in Days

C2.2.1 Additional Relevant Information

C3 Financial Information – Fees and Other Charges

C3.1 Fees- Type (e.g. application, enrolment/admission, tuition), Rate, Frequency

Age Group	Type of Fees	Rate	Frequency of Payment

C3.1.1 Additional Relevant Information

C3.2 Other Charges – Type (e.g. Printing, Photocopying, Certification/Graduation), Rate, Frequency

Age Group	Type of Charges	Rate	Frequency of Payment

C3.2.1 Additional Relevant Information

C4 Organisation of Teaching and Learning, Curriculum and Assessment Related Information

C4.1 Language of instruction

C4.1.1 Language of instruction predominantly used:

C4.1.2 Other language(s) used:

C5 Curriculum and Assessment – Content of Teaching and Learning and Assessment

C5.1 Main Programme/ Study Area offered and Duration of Study

Programme/Study Area	Duration (in months)

C5.1.1 For each Programme/Study Area listed complete Annex 4

C5.1.2 Additional Relevant Information

Section D: Student and Staff Related Information/Data

D1 Student Enrolment Related Information

Please refer to Annex 1 for details.

D1.1 Additional Relevant Information

D2 Staff Related Information

Please refer to Annex 2 for details.

D2.1 Additional Relevant Information

D3 Average Number of Student per Group:

D3.1 Additional Relevant Information

Section E: Infrastructure and Facilities – Related Data

E1 Please complete **Annex 3.**

E1.1 Additional Relevant Information

Section F: Student Protection Related Data

F1	Insurance Coverage for facilities	Yes	☐	NO	☐
F2	Insurance Coverage for Students	Yes	☐	NO	☐

F3 **Additional Relevant Information**

Section G: Partnership Programmes/Arrangements, Recognition and Accreditation

G1 Summary of main partnership programmes/arrangements (including nature of the partnership)

G1.1 Locally

G1.2 Internationally

G2 Summary of Countries/ International bodies/ tertiary education institutions from which the institution has received accreditation/recognition.

Section H: Supporting Documents to Accompany the Application Form

H1 Related to Ownership, Administration, Management, Health and Safety

Tick to show whether the document is Attached, Not Attached, or Not Applicable (NA) to the application. In cases of non-submission, please provide justification in the comment column.

Document		Tick (✓) as appropriate	
		Attached	**Not Attached**
H1.1	Curriculum Vitae of Person (s) Responsible for day to day provision of the educational and training services for each of the stages of education & training provided/to be provided		
H1.2	Copy of National Identity Card of the person responsible of the daily operation of the education and training provider		
H1.3	One passport-size photograph of the person responsible of the daily operation of the education and training provider		
H1.4	Copy of Business Tax Certificate (where applicable)		
H1.5	Copy of Lease Agreement for the premises where the provider of the services/applicant is not the owner of the premises.		
H1.6	Copy of last Health Inspection Certificate/Report		
H1.7	Copy of last Fire Safety Inspection Certificate/Report		
H1.8	Copies of letters of authorisation to provide educational/ training services other than the ones listed on the certificate.		

H2 Related to Student and Teaching Staff Statistics

Document		Tick (✓) as appropriate	
		Attached	**Not Attached**
H2.1	Annex 1: Completed excel database showing Student-Enrolment Related information		
H2.2	Annex 2: Completed excel database showing Staff Related information		

H3 Related to Curriculum and Assessment

Document		Tick (✓) as appropriate	
		Attached	**Not Attached**
H3.1	Copy of International Examinations Results		
H3.2	Annex 4: Summary of Curriculum Content, Assessment/Examinations at the Tertiary Stage		

H4 Related to Infrastructure and Facilities

Document		Tick (✓) as appropriate	
		Attached	**Not Attached**
H4.1	Annex 3: Essential Physical Environment and Infrastructure Facilities Related Data/Information		

H5 General Information

Document		Tick (✓) as appropriate	
		Attached	**Not Attached**
H5.1	Annual Report		

H6 Signature Of Applicant

I certify that the statements made by me to the foregoing questions are true, complete and correct to the best of my knowledge and belief. I understand that any false statement made on this form may provide grounds for the refusal for a certificate of registration/re-registration or for the revocation or continued validity of the certificate of registration.

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

ANNEXES

Annex 1: Students Related Data

Please provide the names and other relevant information of the students by completing *Student Details* sheet of the Excel database entitled *Student and Staff Details*.

Annex 2: Staff Qualifications Related Data

Please provide the qualification and other relevant information of the staff by completing the *Staff Details* sheet of the Excel database entitled *Student and Staff Details*.

Annex 3: Essential Physical Environment and Infrastructure Facilities Related Data/Information

Stage: *Year*

Category 1: Staff and Administration

Facility	**Availability**	**Number**	**Total/Dimension (metric)**	**Additional Relevant Comments**
1.1: Staffroom				
1.2: Head teacher's Room				
1.3: Secretary/Waiting Area				
1.4: Tea Room				
1.5: Additional Offices				
1.6: Counsellor's Room				
1.7: Store				
1.8: Resource Room				
1.9: Staff Toilets				

Additional relevant Information/Comments:

Category 2: General Facilities

Facility	Availability	Number	Total/Dimension (metric)	Additional Relevant Comments
2.1: Classrooms				
2.2: Dining Room				
2.3: Pantry/Store				
2.4: Canteen/Tuck-shop				
2.5: Library				
2.6: Sport Room				
2.7: Multipurpose Court				
2.8: Playing Field				

Additional relevant Information/Comments:

Category 3: Specialist Room

Facility	Availability	Number	Total/Dimension (metric)	Additional Relevant Comments
3.1: Computer Room				
3.2: Science Laboratory + Preparation Room				
Others (Specify)				
3.3:				
3.4:				
3.5:				
3.6:				
3.7:				
3.8:				
3.9:				

Additional relevant Information/Comments:

Category 4: Students' Health and Sanitation

Facility	Availability	Number	Total/Dimension (metric)	Additional Relevant Comments
4.1: Sick Bay				
4.2: Changing Room				
4.3: Shower Room				
4.4: Boys' Toilet				
4.4.1: WC Toilets				
4.4.2: Urinals				
4.4.3: Hand Washing Basin				
4.5: Girls' Toilet				
4.5.1: WC Toilets				
4.5.2: Hand Washing Basin				

Additional relevant Information/Comments:

Teaching/Learning and Assessment/Examinations Programme Details for the Tertiary Stage

Programme/Study Area 01:

Subject (s)	**Compulsory(C) / Optional O)**	**Assessment/Examinations**				
		Local		***International***		*Not applicable*
		Continuous Assessment	*Examinations*	*Continuous Assessment*	*Examinations*	

Programme/Study Area 02

Subject (s)	**Compulsory(C) / Optional O)**	**Assessment/Examinations**				
		Local		***International***		*Not applicable*
		Continuous Assessment	*Examinations*	*Continuous Assessment*	*Examinations*	

Programme/Study Area 03:

Subject (s)	Compulsory(C) / Optional O)	Assessment/Examinations				
		Local		*International*		*Not applicable*
		Continuous Assessment	*Examinations*	*Continuous Assessment*	*Examinations*	

Programme/Study Area 04

Subject (s)	Compulsory(C) / Optional O)	Assessment/Examinations				
		Local		*International*		*Not applicable*
		Continuous Assessment	*Examinations*	*Continuous Assessment*	*Examinations*	

Additional relevant Information/Comments:

You can copy and add more Teaching/Learning and Assessment/Examinations Programme Details on a separate page.