





Application for Course Approval / University Recognition

Course Approval

University Recognition

Applicant Name:			Conta	ct No:
Date of Birth:	DD/MM/YYYY	ID Card No:		Sex: F M
Name of the Academic Programme:				
Name of the University and Country: :				
Study Duration of the programme: MQA Level:				
Entry Criteria:				
Highest Qualification:				
For Programmes Abroad Course Accreditation Status (eg; Accredited by Malaysian Qualification Agency & Malaysia Nursing Board.)				
a. Name of the Accreditation board:				
b. Name of the Regulatory body:				
DOCUMENTS TO BE SUBMITTED				
 Copy of National ID Card Copies of Lower Secondary / Higher Secondary Certificate /Higher education Certificate Placement copy from the university (only for course Approval) Documents showing that the training provider is recognised in the country of study For recognition of courses done abroad, documents showing programme duration and structure. 				
Note: Forms with Incomplete documents will not be accepted from Maldivies Nursing and Midwifery Council.				
Declaration by Applicant				
Name:		Signature:		Date: