TUPOU TERTIARY INSTITUTE (TTI)

FASI & POUONO CAMPUS

Application for an Offer of Place Form

All application forms should reach the TTI registration office NO LATER THAN FRIDAY 22nd January 2027

TTI is a Christian Higher Education Institution of the Free Wesleyan Church of Tonga

TTI Main Campus
Lavinia Rd, Fasi –moe –Afi
Nuku'alofa
Telephone: (676) 28-890 or 28-889
Email: office@tti.to
Web Site: www.tti.to

TTI Pouono Campus
Laifone Rd, Waterloo, Kameli
Neiafu, Vava'u
Telephone: (676) 70-995

PLEASE READ THE INSTRUCTIONS BELOW CAREFULLY BEFORE YOU COMPLETE THIS APPLICATION FORM

INSTRUCTIONS

The purpose of this application form is to obtain the information we need to offer you a place at TTI. This form also specifies the legal conditions of your enrollment with TTI.

The applicant (prospective students) must complete the application form by

- **COMPLETING** Sections, **A – G** of this form by printing answers clearly or tick the appropriate box.
- **SIGNING** the form and attaching all additional documentation that is required.

A PERSONAL DETAILS - PRINT your full legal name (as per Birth Certificate)

1	**Family Name:**	2	**First Name(s):**
3	Preferred First name:	4	**Gender** *(please tick)* **Male** ☐ **Female** ☐
5	**Preferred title:** Ms ☐ Miss ☐ Mrs. ☐ Mr. ☐ other (specify) :		
6	**Date of Birth** ☐☐ day ☐☐ month ☐☐ year	7	**Guardian's name:**
8	**Applicant's Home Address:**	9	**Guardian (s) address** (if different from home address)
Phone: ***Mobile:***		***Phone:*** ***Mobile:***	
Facebook: *Email:*		*Facebook:* *Email :*	

B ACADEMIC INFROMATION

1 **Secondary / High School**

Name of Last secondary / High School .....

What Year was your final year at secondary school? .....

Level (F5, 6 or 7) and exam passed (TSC, TFSC, or TNFSC) .....
(Please enclose original academic results and a copy for F5 & F6 &F7)

2	**Tertiary Study**
	Have you ever enrolled in any tertiary education institution? Yes ☐ No ☐
	Name of University /Institute / College …… Country ……
	How many years you attended tertiary education? …… Years
	Name of qualification gained: ……***(Please enclose certified academic results)***

C DOCUMENTATION

You must provide ORIGINAL AND A COPY of the following *Attached (please tick)*

- Birth Certificate ONLY ◯
- Academic Certificates and Transcripts ◯
- Reference letter from Principal of the last school/institute you attended **or** current employer if you're working ◯
- Two recent passport photos (Original Only) ◯
- Police Record (Aged Care Programme Only) ◯
- Marriage Certificate (Married Applicants Only if different from birth certificate) ◯

(Forms will NOT be accepted if the above are not completed)

D PROGRAMME OF STUDY

Please tick the program you are applying for :

Programme of Studies	**Tick Below**	**Programme of Studies**	**Tick Below**
TTI FASI CAMPUS ONLY			
Certificate in Business Level 4		Diploma in Information Systems Level 5	
Certificate in Music and Performing Arts Level 4		Diploma in Business Level 5	
Certificate in Teaching Studies Level 4		Diploma in Architecture Level 5	
Certificate in Architectural Technology Level 4		Diploma in Teaching Studies Level 5	
Certificate in Social Practice and Counselling Level 4		Diploma in Heath and Sport Science Level 5	
Certificate in Youth Development Level 4		Graduate Diploma in Christian Education Level 7	
Certificate in Aged Community Care Level 1		Bachelor in Education Level 7	
National Certificate in Aged Community Care Level 2		Bachelor in Applied Business Studies Level 7	
National Certificate in Aged Community Care Level 3		Bachelor in Information Technology Level 7	
Certificate in Sports and Health Science Level 4		Bachelor in Architectural Technology Level 7	
Certificate in Information Technology Level 5		Master in Education Level 9	
National Certificate in Vocational Training and Assessment Level 4			
TTI POUONO CAMPUS ONLY			
Certificate in Automotive Engineering Level 2		Certificate in Hospitality (Introductory to Cookery) Level 2	
Certificate in Automotive Engineering Level 4		Certificate in Electrical & Electronics Technology Level 3	
Certificate in Carpentry Level 3		Certificate in Information Technology Level 4	
Certificate in Marine Multi-Skills Level 3			

E CONDITION OF ACCEPTANCE

Successful applicants for all programmes will be informed by email or telephone by ***29th of January 2027*** and your place will be confirmed by paying the ***Registration of TOP $210*** during enrollment on ***1st to 3rd of February, 2027.*** Late enrollment will be on the ***8th - 12th of February 2027*** with a late registration fee of $50. ***Orientation for new students will be on the 4th & 5th of February, 2027***

F STUDENTS DISCLOSURE INFORMATION

Payment, Withdrawal, Refund Policy and Character Building Programme

(a) Application procedure

- Applicants need to complete all sections of the TTI Application Form, attach all relevant information and forward to the **TTI Registration office, Lavinia Rd, Fasi moe Afi, Nuku'alofa or TTI Pouono Campus, Laifone Rd, Waterloo, Kameli, Neiafu, Vava'u respectively.**

(b) Withdrawal and Refund Procedures

(i) Full refund for any withdrawals is by 5th February, 2027. Thereafter you will be asked to pay the % of tuition due in any month you will withdrawal on. For example, if withdrawal in any day in March, you are entitled to pay 50% of the course that you withdrawal from.

(ii) Any application for withdrawal MUST fill and submit the appropriate withdrawal form (from the administration office) and must state reasons in full. Written confirmation from sponsors/guardians/parents is required.

(c) Character Building Programme

- **Applicants MUST enroll in the Character Building Programme which is mandatory for all TTI students.**

G. DECLARATION BY APPLICANT

(a) I Declare that the information supplied in this application and the attached document is correct and complete.
(b) I have read and accept the Enrollment, Payment, withdrawal and Refund Policy above.
(c) I understand it is my responsibility to follow all regulations and policies of TTI.
I give permission for TTI to contact my sponsors/guardians/parents if the need arises

Signature and name of applicant student.

Signature: …….. Print Name…… Date……

If not sign by prospective student, please sign and give name, and relationship to applicant

Signature……. Print Name…… Relationship to Applicant: ……..

Date……

TTI Registration Services ONLY: Approval of Program (s)

Approved ☐ Declined ☐ Date of Approval……

Comments/Conditions:

Sign by Program Manager…… Sign by Dean Academic……..

Date: …… Date:……

Additional Information

1.Blood Type (*if known*): _____

2. Any Medical Condition/Health Issues that the Institution should be aware of: _____

3. Why have you chosen to apply to TTI?

4. Why should we offer you a place at TTI for 2027?