

The REAL Learning CENTER Larkana

Admission Form

Date			

Name:					
Fathers Name:					
Address:					
Phone # (landline) 1	2				
Mobile# 1	2				
E-mail :					
NIC#					
Previous Education:-					
Intermediate					
Matriculation					
Bachelors					
Masters Specify if any other					
·	bify				
Why are you doing this course?					
I want to improve my communication skills.					
I want to work for my business for doing all my business assignments my self.					
I want to start my new business / job on the bases of this course.					
Specify if any other reason:					
Course Name:					
Course Type: Regular Class Weekend Class					
For Office Use only Registration No: Roll No:					

Facebook.com/TheRealLearningCenterLarkana Mobile: 03433846385

Facebook.com/RizwanAhmedMemon Website: www.TRLCL.eu5.org

Email: TheRealLearningCenterLarkana@gmail.com Twitter.com/TRLCL