



MALTA UNIVERSITY CONSULTING

**APPLICATION FORM**  
**Food Handlers Course Category B – Registration Fee €45**

Venue: University Residence, Robert Mifsud Bonnici Street, Lija

Title: ..... Name:..... Surname: .....

I.D. Card Number .....

Address: .....  
.....

Profession: .....

Tel/mobile: .....

Email: .....

Company/Organisation: .....

**Kindly tick where applicable:**

Tuesday 3<sup>rd</sup> and Wednesday 4<sup>th</sup> July

or

Tuesday 7<sup>th</sup> and Wednesday 8<sup>th</sup> August

**Signature of Applicant:**

**Date:**

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Payment Options:

**By cheque, payable to Malta University Consulting Ltd**

**By cash** at The University Residence, Robert Mifsud Bonnici Street, Lija

**By Bank Transfer:** Name of Bank: Bank of Valletta p.l.c.  
Address: University Campus, Msida  
Account Number: 16707297016  
IBAN: MT20VALL22013000000016707297016  
Bank's BIC: VALLMTM

**Note: Payments by cheques are to be sent to:**

**Ms Maria Bugeja  
Malta University Holding Co. Ltd.,  
The University Residence,  
Robert Mifsud Bonnici Street, Lija.**

