



Mauritius Network Services Ltd | Silicon Avenue, Cybercity, Ebene, 72201, Republic of Mauritius
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Customer Service
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Helpdesk
 T: (230) 401 6825 | Email: helpdesk@mns.mu

TRAINING APPLICATION FORM

Ref: TRNG-APP-01

PARTICIPANT DETAILS

Title: Mr Mrs Miss Session No: _____

Surname: _____ Other names: _____

Tel: _____ Mob: _____ Email: _____

NIC: _____ Passport: _____
Please attach a copy of NIC to this form For non-resident only

User IT Experience: Fluent Good Not IT literate Preferred language: French English

Please tick where applicable

SYSTEM	TIME	SYSTEM	TIME
CONTRIBUTIONS NETWORK PROJECT (CNP)	09:00 – 16:15 hrs	MCCI CERTIFICATE OF ORIGIN	09:30 – 12:00 hrs
TRADENET ELECTRONIC PAYMENT SYSTEM (TEPS)	09:30 – 12:00 hrs	TRADELINK SINGLE WINDOW	09:30 – 12:00 hrs
TN PHASE III DECLARATION WEB	09:30 – 12:00 hrs	WAREHOUSE MANAGEMENT SYSTEM	09:30 – 12:00 hrs
TN PHASE III DECLARATION FRONT END	09:30 – 12:00 hrs	PUBLIC DEBT MONITORING SYSTEM (PDMS)	09:00 – 15:00 hrs
TN PHASE III -FREIGHT STATION	09:30 – 12:00 hrs	COMPANIES & BUSINESSES REGISTRATION INTEGRATED SYSTEM (CBRIS)	09:00 – 16:15 hrs
TN PHASE VI- CERTIFICATES OF ORIGIN	09:30 – 12:00 hrs	COMPANIES & BUSINESSES REGISTRATION INTEGRATED SYSTEM (XBRL)	09:00 – 12:00 hrs
FREPORT ONLINE TRACKING SYSTEM	09:30 – 12:00 hrs		

COMPANY & PAYMENT DETAILS

Company name: _____

Address: _____

Contact person: _____ Job title: _____ Tel: _____

Email: _____

Mode of payment: _____

Training fees (Rs): _____

Official seal

Notes

- Please provide contact details of individual to whom the invoice will be sent.
- Cheques must be drawn to the order of **Mauritius Network Services Ltd**.
- Form to be filled and sent to MNS either by Fax or Email **3** business days before the training scheduled date.
- **All training will be delivered at Mauritius Network Services Ltd office, Silicon Avenue, CyberCity, Ebene.**

By providing the above personal data, I consent to the collection, processing and retention of such personal data by Mauritius Network Services Ltd, for payment purposes and issuance of a certificate of attendance. I consent to the communication of the personal data to the relevant authority as required by law. All personal data shall be collected and processed in accordance with the Data Protection Act.

Signature: _____ Date: _____