



## SCHEDULE 2

(Regulation 27(1))

Form 3

FIJI HIGHER EDUCATION COMMISSION

### APPLICATION FOR CONVERSION OF REGISTRATION

<b>Name of Institution</b>	
<b>Type of Institution</b>	
<b>Recognition Number</b>	
<b>Provisional Registration Number</b>	
<b>Category of Institution</b>  (Please choose a number from the table at the back of this form)	

### APPLICATION CHECKLIST

- Completed Application form for Conversion of Registration
- Certificate of Provisional Registration
- Any other documents to support the application

---

#### FOR OFFICIAL USE

Fees Paid \_\_\_\_\_ Receipt Number \_\_\_\_\_ File Number \_\_\_\_\_

Receiving Officer \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_/\_\_\_/20\_\_

	<b>Decision</b>	
<b>Approved</b>	Registration Number	
	Certificate Number	
<b>Not approved</b>		

Comments:

---

Name of Director \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_/\_\_\_\_\_/20\_\_

Instructions for completing this form

This form has two sections that must be completed in full:

**Section A** [to be completed on this form]  
 1 - 5 provide administrative, company and management information of the institution, as contained in the application form for registration - Schedule 2 Form 1.

**Section B** [to be completed on this form and may have supporting appendices]

- **Conditions for Registration** - as shown on the Certificate of Provisional Registration.
- **Details of Remedial Action** - a full written submission may also be made to the Commission to provide more information .
- **New Details** - supporting documents are necessary to demonstrate that the requirements have been met
- **Comments** - if any, that you wish to include.

**Declaration** - to be completed by the authorized person and attached to this form.

**A. ADMINISTRATIVE, COMPANY AND MANAGEMENT INFORMATION**

[as shown in the Application Form: Schedule 2 Form 1]

**1. Particulars of the institution**

Name of Institution	
Type of Institution <i>(as shown in the certificate of Provisional Registration)</i>	
Physical Address	
Postal Address	
Contact Details	Telephone:
	Fax:
	E-mail:
	Website:

**2. Particulars of authorized contact person**

Name	
Designation <i>[CEO / Managing Director/ Chairman / Vice-Chancellor etc.]</i>	
Postal Address	
Contact Details	Telephone
	Fax
	E-mail

### 3. Particulars of the Head Office

Physical Address	
Postal Address	
Contact Details	Telephone:
	Fax:
	E-mail:
	Website:

### 4 Particulars of the Company

#### (a) Registration details

Legal name of the institution	
Business Registration Number	
VAT Registration Number	
Tax Identification Number	
Name of Bank	
Bank Account Number	

#### (b) Details of the parent institution [if applicable]:

Name of the parent Institution: \_\_\_\_\_

Name of the head: \_\_\_\_\_

Title: \_\_\_\_\_

#### (c) Academic qualifications of head:

\_\_\_\_\_  
\_\_\_\_\_  
[name of university]

#### (d) Contact details of the head of the institution

Postal address	
Residential Address	
Contact Details	Telephone:
	Fax:
	E-mail:

### 5. Particulars of the Management

#### (a) Chief Executive Officer or Head of institution

Name and title	
Designation [CEO / Managing Director / Chairman / Vice-Chancellor etc.]	

Academic Qualification <i>[List all]</i>	
Contact Details	Telephone:
	Fax:
	E-mail:

(b) Board of Directors

Name in Full	Designation	Highest Academic Qualification

(c) Holding Company or any other organization to which the institution is subordinate

(i) Relationship between the institution and the holding company or other organization

(ii) List of owners in accordance with the Memorandum and Articles of Association.

Name in Full	Designation	Highest Academic Qualification

(d) Financial details of the institution

Name of the Auditor	
Registration Number <i>[Issued by Fiji Institute of Accountants]</i>	
Postal Address	
Contact Details	Telephone:
	Fax:
	E-mail

Section B

- **Conditions for Registration** - as shown on the Certificate of Provisional Registration.
  - **Details of Remedial Action** - a full written submission may also be made to the Commission to provide more information.
  - **New Details** - supporting documents, including photographs, are necessary to demonstrate that the requirements have been met.
  - **Comments** - if any, that you wish to include.
-

<b>Conditions for Registration</b> [as shown on the Certificate of Provisional Registration]	<b>Details of Remedial Action</b> [a full written submission may also be made to the Commission to provide more information]

<b>New Details</b>	<b>Supporting documents</b>

**Comments** - if any, that you wish to include.

---



---



---



---



---



---



---



---



---



---

Name: \_\_\_\_\_ Designation: \_\_\_\_\_

Date: \_\_\_\_\_



**Table on Category of Higher Education Institutions**

<b>Category Number</b>	<b>Description</b>
1	Vocational Institution
2	Local Higher Education Institution conferring single awards up to diploma level
3	Local Higher Education Institution conferring multiple awards up to diploma level
4	Overseas Higher Education Institution conferring multiple awards up to diploma level
5	Local Higher Education Non-University Institution or Non Degree awarding Institute of Technology conferring awards up to degree level
6	Overseas Higher Education Non-University Institution or Non Degree awarding Institute of Technology conferring awards up to degree level
7	Overseas Higher Education Institution
8	Local Higher Education Institution