



Send application form to:
biminfo@cpegrouphk.com

Application for RTTP BIM Course

please tick

<input type="checkbox"/> Autodesk Revit Architecture Professional Certificate (Elementary)	<input type="checkbox"/> Autodesk Revit Architectural Fundamental
<input type="checkbox"/> Autodesk Revit Architecture Professional Certificate (Advanced)	<input type="checkbox"/> Autodesk Revit Structural Fundamental
<input type="checkbox"/> Autodesk Revit MEP Professional Certificate (Elementary)	<input type="checkbox"/> Autodesk Revit MEP Fundamental
<input type="checkbox"/> Autodesk Revit MEP Professional Certificate (Advanced)	<input type="checkbox"/> Autodesk Revit Families Fundamental
<input type="checkbox"/> Autodesk Civil 3D Practical Course-Highways	<input type="checkbox"/> Autodesk Navisworks Practical Course
<input type="checkbox"/> Autodesk Civil 3D Practical Course-Drainage & Utilities	<input type="checkbox"/> Navisworks in BIM
<input type="checkbox"/> BIM Adoption in Government Project	<input type="checkbox"/> Basic BIM for Project Management (1D-5D)

PERSONAL PARTICULARS

Name in Chinese:

Name in English:

Mobile:

HKID Card Number:

Correspondence Address:

E-mail Address:

ACADEMIC QUALIFICATIONS: (in chronological order)

Name of Institution & Country	Title & Classification of Award	Full-time/Part-time	Year of Award

PROFESSIONAL QUALIFICATIONS: (in chronological order)

Awarding Institution	Title of Award (please state type of membership)	Year of Award

EMPLOYMENT AND WORK EXPERIENCE: (in chronological order)

From (mm/yy)	To (mm/yy)	Full-time/ Part-time	Name of Organization	Position	Job Duties

PRIOR AUTOCAD AND/OR BIM AND/OR RELATED TRAINING

1. _____
2. _____
3. _____

REMARK:

- (a) I understand that all information provided will be used in admission process, the data will also become part of my student record and may be used for all purpose relating to studies in accordance with the procedures of the Training Centre.
- (b) I agree the Training Centre to keep me informed of any new courses and seminar activities through the provided personal contact details.
- (c) Cheque Payee Name: **Continuing Professional Education Limited**
- (d) English Language software shall be used for the course unless otherwise stated.
- (e) Our Training Centre reserves the right to make any changes on the course contents, timetables and fees without special notification.

Applicant's Signature _____ Date _____

@Sept2020