

# FIRST SCHEDULE

(Regulations 3, 5, 6,7,8,10,11,13,14,15 and 19)



**Republic of Zambia**

Form I  
(Regulation 3)  
(To be completed in triplicate)

## The Tourism and Hospitality Act, 2015 (Act No. 13 of 2015)

### The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

<b>APPLICATION FOR REGISTRATION</b>						
<b>Please complete in block letters</b>		Shaded fields for official use only		Application No.		
				Date/Time		
<i>Information Required</i>		<i>Information Provided</i>				√
<b>PART I PARTICULARS</b>						
1.	(a) Surname (block capitals)					
	(b) Other names					
2.	Sex (Tick (√) where applicable)	Male		Female		
3.	Date of birth (dd /mm/ yyyy)					
4.	Place of birth	District		Country		
5.	Nationality					
6.	(a) National Registration Card/ Passport/ Permit No.					
	(b) Place of issue					
	(c) Date of issue (dd /mm/ yyyy)					
7.	Address					
	(a) Physical address House No.					
	(b) Postal address					
8.	Contact details					
	(a) Telephone No.					
	(b) Fax No.					
	(c) Mobile phone No.					
	(d) Email address					

<b>EDUCATIONAL BACKGROUND</b>	
9.	School, Technical College or University attended (give dates)
10.	Course of study
11.	Professional examination passed (give dates)
12.	Membership of professional organisations (give grade of membership)

**PART II  
EMPLOYMENT RECORD**

13.	Present employment	
	(a) Name of Employer	
	(b) Position held	
	(c) Date of appointment	
	(d) Nature of work undertaken	

14.	Previous employment (whole career to date)			
	Name of Employer	Date/ Period Employed	Positions held	Nature of work undertaken

15.	<b>Appendices</b>
	Certified copies of all academic and medical certificates are enclosed
	Application fee enclosed

**DECLARATION**

I declare that the information furnished by me in this application is true, correct and complete to the best of my knowledge.

I understand that any incorrect, misleading or untrue information or the withholding of any relevant information may affect my registration as an HOTEL MANAGER.

..... Signature  
 Name of applicant  
 .....  
 Date

<b>FOR OFFICIAL USE ONLY</b>
Received by: ..... Officer (Name and Signature) <span style="float: right;">Date</span>

Application Fee Received: ..... Receipt No. : .....

Date presented to the Secretary: .....

Decision: .....

Date applicant informed of decision: .....

Fee for registration received: .....

Registration number: .....

Remarks: .....

OFFICIAL  
STAMP