

# THE IFSP FOUNDATION CERTIFICATE IN TRUST LAW & MANAGEMENT

STUDENTS' APPLICATION FOR EXAM

**MONDAY, 23<sup>rd</sup> JUNE 2008 : 9am-12.15pm**  
at Hall 'A', Gateway Building, University of Malta

NAME & SURNAME: .....

I.D. NUMBER .....

ADDRESS: .....

.....

..... CODE.....

E-MAIL .....

PHONE..... FAX..... MOB.....

Fee: IFSP student members: Free  (tick where appropriate)  
IFSP Full/Associate members: €30   
Non-members: €50

SIGNATURE.....

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FOR OFFICE USE

Payment effected by..... on.....

Cash/ Cheque Number .....Receipt Number .....

*Applications are to be sent to the following address by 4<sup>th</sup> June 2008:  
IFSP, P.O. Box 37, Valletta, VLT 1000  
together with payment if this is required.*