ISPPME

NOTICE TO STUDENTS

Payment plans will only be accepted where parents/ Guardians/ witness has signed the relevant

forms, which are attached below. To avoid inconvenience at the commencement of the new

academic year, you are advised to ensure that this has been done. The fees must be cleared on or

before 31 October 2024. The payment plan is subject to approval provided that the student has

made the initial payment of \$100usd. Kindly send the payment plan and proof of payment for the

initial payment to admin@isppme.com and copy isppme6@gmail.com.

NB: Failure to pay on the stated date of payment there is a 2% interest on the amount due

and the student will not be allowed to sit for examinations and have access of google

classrooms.

MR Z. MATINHA

REGISTRAR

ACADEMIC AFFAIRS

E: registrar@isppme.com

INSTITUTE OF SUSTAINABLE PROJECT PLANNING, MONITORING AND EVALUATION STUDENTS

INSTITUTE OF SUSTAINABLE PROJECT PLANNING, MONITORING AND EVALUATION STUDENTS

I <u></u>		am responsible for the payment of fees for	
Name of S	Student <u></u>	Student Number	
Propose th	he following credit plan towards payn	nents of my fees.	
Occupation	on Telephone	: Work <u></u> .Cellphone <u></u>	
Workplac	ce		
PROGRAM: DIPLOMA IN SUSTAINABLE PROJECT MANAGEMENT, MONITORING AND EVALUATION			
Agree to pay semester fees as follows: FEES DUE: \$430.00USD			
The amount to get you registered will be \$215.00USD			
i)]	Initial Pay <mark>ment</mark> (Minimum \$100.00 U)	SD)	
ii) l	By <u></u>	<u>\$</u>	
iii)	Ву	<u>\$</u>	
iv) I	Ву	\$	
Name of Parent/Guardian/Witness			
Address		- 	
Parent/Guardian/Witness Signature R ID. No			
Registra	r's Department	Date	

INSTITUTE OF SUSTAINABLE PROJECT PLANNING, MONITORING AND EVALUATION STUDENTS

Iam responsible for	or the payment of fees for		
Name of StudentStudent Num	ıber		
propose the following credit plan towards payments of my fees.			
Occupation	ne <u></u>		
Workplace			
PROGRAM: POST GRADUATE DIPLOMA IN SUSTAINABL MANAGEMENT, MONITORING AND EVALUA	E PROJECT ATION		
Agree to pay semester fees as follows: FEES DUE: \$450.00USD			
The amount to ge <mark>t yo</mark> u registered will be \$225.00USD			
i) Upon Reg <mark>istrati</mark> on (Minimum \$225.00USD). <u>\$</u>			
ii) By <u>\$</u>			
iii) By <u>\$</u>			
iv) By \$			
Name of Parent/Guardian/Witness			
Address			
Parent/Guardian/Witness SignatureID. NoID. No			
Registrar's Department Date Date			