



FIJI TEACHERS REGISTRATION AUTHORITY

Level 2, Harbour Front Building, Rodwell Road | GPO Box 12671, Suva
P: +679 3100 125 / 3311 175 | Voda: +679 8646 523 / Digi: +679 7182 773
E: enquiries@ftra.com.fj | W: www.ftra.com.fj

FTRA FORM 4 APPLICATION FOR REGISTRATION - INSTITUTIONAL

Application Type:

- Government Department
- Statutory Bodies/NGO/Volunteer Organization/Other Institutions
- Teacher Training Institutions

FTRA Registration Requirements\Checklist –Please tick the following respective box:

Government Department

	Applicant	Official Use
1. Fully & Accurately Completed & Endorsed FTRA Form 4	<input type="checkbox"/>	<input type="checkbox"/>
2. Letter from their Department/Ministry	<input type="checkbox"/>	<input type="checkbox"/>
3. Approval from PS Education	<input type="checkbox"/>	<input type="checkbox"/>
4. Programme Brief/Proposal/Plan	<input type="checkbox"/>	<input type="checkbox"/>

Statutory Bodies/NGO's/Volunteer & Other Organisations

	Applicant	Official Use
1. Fully & Accurately Completed & Endorsed FTRA Form 4	<input type="checkbox"/>	<input type="checkbox"/>
2. Approval Letter from PS Education (<i>only for MoE School Visits</i>)	<input type="checkbox"/>	<input type="checkbox"/>
3. Approval Letter from the HOS (<i>only for Private School Visits</i>)	<input type="checkbox"/>	<input type="checkbox"/>
4. Written details of the Project	<input type="checkbox"/>	<input type="checkbox"/>
5. Passport Size Photo	<input type="checkbox"/>	<input type="checkbox"/>
6. Relevant Academic Qualification Certificates	<input type="checkbox"/>	<input type="checkbox"/>
7. Police Clearance (<i>with no adverse record</i>)	<input type="checkbox"/>	<input type="checkbox"/>
8. Medical Report (<i>Validity-3 months</i>)	<input type="checkbox"/>	<input type="checkbox"/>
9. Passport Copy (<i>Expatriates</i>)	<input type="checkbox"/>	<input type="checkbox"/>
10. Work Permit/Volunteer Visa (<i>if applicable</i>)	<input type="checkbox"/>	<input type="checkbox"/>

Teacher Training Institution (Practicum)

	Applicant	Official Use
1. Fully & Accurately Completed & Endorsed FTRA Form 4	<input type="checkbox"/>	<input type="checkbox"/>
2. List of Practicum Students (With Full Names as per BC)	<input type="checkbox"/>	<input type="checkbox"/>
3. Police Clearance Report for Practicum Students	<input type="checkbox"/>	<input type="checkbox"/>

FTRA FORM 4
APPLICATION FOR REGISTRATION - INSTITUTIONAL

1. CONTACT DETAILS (Institution/Government Department)

Name of Institution: _____

Contact Person: _____

Telephone: _____

Mobile: _____ Email Address: _____

Name of the Programme: _____

Programme Description: _____

Facilitators: _____

(Submit Requirements as Noted on Page 1)

Duration of the Programme/Visit to School: _____

(Provide Dates and Term/Timeframe)

Signature (Head of the Institution)

Institution Stamp

2. FEE PAYMENT DETAILS:

The Registration Fee must be paid prior to the Registration being granted.

(A) ANNUAL FEE (New/Renewal): \$250.00

(B) LODGEMENT FEE (New Applications): \$10.00

Payment Amount: \$ _____ Receipt Number: _____

Date of Payment: _____ Office at which the payment was made: _____

Note:

- **Cheques: payable to the PS Education. Personal cheques are NOT accepted.**
- **Payments are to be made in Fijian Dollars**
- **Online payments; refer to www.ftra.com.fj under **Registration Tab****
- **Mpasa & Mycash: www.ftra.com.fj under **Registration Tab****

3. FIJI TEACHERS REGISTRATION AUTHORITY APPROVAL

Signature: _____

Designation: Chief Executive Officer (CEO)

Date: _____ FTRA Stamp: _____