



APPLICATION FORM

100 Credit Hours Course on Certified Practitioner
of Hypnosis/Hypnotherapy, (NGH, USA)

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picture here

Personal Details of the Applicant

Complete Name (In Block Letters)			
Date of Birth		Age	
Gender		Education	
Occupation		Designation	
Religion		CNIC #	
Mobile Number		E-mail Address	
Telephone number (Home)			
Have you ever attended any Mind Science / Related courses? (e.g. Hypnosis, NLP, Silva, Reiki, etc.)			
If Yes, When & Where? (provide details)			
Why are you interested in attending this Course?			
What different would you be able to do after the completion of this Course?			
Have you ever attended any seminars conducted by Dr. Imran or his Trainers? If Yes, mention the details?			

