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Geomatics Department  
Ministry of Finance and Planning  
Malé, Republic of Maldives

**APPLICATION FOR SURVEYOR'S REGISTRATION***GENERAL INFORMATION*

Name: .....

ID Number: .....

Address:.....

Phone: .....

.....

Email: .....

.....

*QUALIFICATION**Please list your qualifications with the details below*

Qualification	Institution	Start date	End date

*DECLARATION*

I, ..... hereby declare that the information given in this form is true and accurate, and is aware that providing false information is an offense.

Date: .....

Signature:

*DOCUMENTS REQUIRED (attested)*

- ☐ Copy of National Identity Card
- ☐ MQA accredited copy of Educational Certificates and Transcripts
- ☐ Course Outline

\*All documents and completed form should be submitted to Geomatics Department or emailed to [info.geomatics@finance.gov.mv](mailto:info.geomatics@finance.gov.mv)