

CENTRE FOR TECHNICAL VOCATIONAL EDUCATION, TRAINING AND RESEARCH (WORLD BANK ASSISTED CENTRE OF EXCELLENCE IN TVET) UNIVERSITY OF NIGERIA, NSUKKA

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PASSPORT PHOTOGRAPH

APPLICATION FORM

IDENTIFICATION (Youro	ffícíal	name	as ít	wíll i	ndí	cate o	n the	v Cert	Tífíco	ite))
Surname Name First												
Other Names												
ADDRESS AND GENERAL INFORMATION												
Contact Address												
Phone Number												
Gender												
Email (If Any)												
LGA/State of Origin												
Occupation (If Any)												
AREAS OF INTEREST	C (PLS DO	O NOT S	SELECT	MORI	E THA	N TV	VO OPI	TIONS)			
1. General Training Course												
2.												
												7
Duration of Train	Three					nths						
APPLICANT'S CERTIFICATION												
I certify that all the information provided above is correct.												
Candidate Name:	Sign				ature:				Date:			
FOR OFFICE USE ONLY												
Name of Receiver: Signature Date:												

NOTE: Please return the completed Application Form with Two Passport Photograph, One File Jacket and Evidence of Payment (Receipt).