

WECASS GLOBALTECH RENEWABLE ENERGY CENTRE



IMPORTANT NOTICE/ INSTRUCTIONS ON HOW TO COMPLETE THIS REGISTRATION FORM:

1. All fields are important and must be completed with adequate information.
2. The form should be hand filled but in **CAPITAL** or **BLOCK** letters only.
3. To return completed form, scan and e-mail it to: info@wecass-globaltech.com A confirmation of receipt will be sent to your e-mail upon receipt. All **requirements** as stated on the 2nd page of this form must be scanned and sent alongside the completed form to the same e-mail provided.
4. To secure a placement in the centre and to have your admission processed in time, please ensure appropriate fees are paid before commencement date.

PERSONAL INFORMATION:

| | | | |
|---|--|------------------------------------|--------------------------------------|
| Surname: | | | |
| Middle Name: | | | |
| First Name: | | | |
| Date of Birth: | | Place of Birth: | |
| Sex: | Female <input type="checkbox"/> | | Male <input type="checkbox"/> |
| Religion: | | | |
| Blood Group: | | Genotype: | |
| Phone No: | | | |
| Personal Address: | | | |
| Official Address: | | | |
| Email: | | | |
| Nationality: | | | |
| State/ Region: | | | |
| LGA/ Municipal council: | | | |
| Marital Status | | | |
| Physically Challenged? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Describe: |
| Full Name and Phone No. of Doctor or person to contact in case of Emergency: | | | |

NEXT OF KIN:

| | | | |
|--------------------------------|--|--------------------|--|
| Surname: | | First name: | |
| Nationality: | | | |
| State/ Region: | | | |
| LGA/ Municipal council: | | | |

SPONSORSHIP:

| | | | |
|------------------------------------|--------------------------|-----------------------|----------------------|
| Type: (tick as appropriate) | Private/Corporate | Regional Govt. | Federal Govt. |
| Name of sponsor: | | | |
| Sponsor's Address: | | | |
| Telephone/ e-mail: | | | |

ACADEMIC QUALIFICATIONS:

| | |
|--|--|
| University Degree: | |
| (High) School Certificate: | |
| Primary School Certificate: | |
| Other Qualifications/Certificate: | |

COURSE APPLIED FOR: (Please tick as applicable)

- Solar and Wind energy Professional Courses**
- IT-Server and Network administration Professional Course**

Applicant's Signature _____ **Date** _____

Please Scan and send the following along with the completed form:

1. Evidence of Academic qualifications/ certificates.
2. Information page of your International passport (mandatory for applicants from other countries apart from Nigeria) National I.D card/ Drivers license or any other means of official identification for applicants from Nigeria.

FOR OFFICE USE ONLY:

(To be completed by The Training Coordinator; WECASS GLOBALTECH RENEWABLE ENERGY CENTRE)

COURSE ADMITTED FOR:

| |
|--|
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ACADEMIC SESSION

| | | |
|--|-----------------|-----------------|
| | OPENING: | CLOSING: |
|--|-----------------|-----------------|

TOTAL FEES PAID:

| |
|--|
| |
|--|

COMMENTS:

| |
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| |
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ADMISSION STATUS (TICK AS APPLICABLE)
 YES
 NO

APPROVED BY _____

SIGNATURE _____ **Date** _____