

AFFIX  
PASSPORT  
HERE

**1.0 CANDIDATE'S DATA** (fill all in CAPITAL LETTERS)

**1.10 PERSONAL DETAILS**

1.11	SURNAME										
1.12	FIRST NAME										
1.13	MIDDLE										
1.14	DATE OF BIRTH	GENDER (tick one)		MARITAL STATUS (tick one)			NATIONALITY (indicate one)				
	DD   MM   YYYY	MALE	FEMALE	SINGLE	MARRIED	OTHER	<table border="1"> <tr> <td>NIGERIAN <i>(Specify L.G.A)</i></td> <td>NON NIGERIAN <i>(Specify)</i></td> </tr> <tr> <td></td> <td></td> </tr> </table>	NIGERIAN <i>(Specify L.G.A)</i>	NON NIGERIAN <i>(Specify)</i>		
NIGERIAN <i>(Specify L.G.A)</i>	NON NIGERIAN <i>(Specify)</i>										
1.15	STATE OF ORIGIN										

1.20 MODE OF IDENTIFICATION (select one)	IDENTIFICATION NUMBER
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1.21	INTERNATIONAL PASSPORT	
1.22	NATIONAL DRIVER'S LICENSE	
1.23	PERMANENT VOTER'S CARD	
1.24	NATIONAL IDENTITY CARD	

**1.30 CONTACT INFORMATION**

1.31	PERMANENT ADDRESS										
1.32	CONTACT ADDRESS										
1.33	E-MAIL										
1.34	ALTERNATE E-MAIL										
1.35	TELEPHONE NUMBER(S)										
1.36	WHATSAPP NO.										

**1.40 NEXT OF KIN DETAILS**

1.41	SURNAME										
1.42	OTHER NAMES										

1.43	RELATIONSHIP	
1.44	CONTACT ADDRESS	
1.45	PHONE NUMBERS	
1.46	IDENTIFICATION NO.	
1.47	WEBSITE (IF ANY)	

## 2.0 EDUCATIONAL AND ACADEMIC QUALIFICATION (fill all in CAPITAL LETTERS)

### 2.10 SCHOOLS ATTENDED

2.11	PRIMARY SCHOOL(S) ATTENDED	1	
		2	
2.12	SECONDARY SCHOOL(S) ATTENDED	1	
		2	
2.13	TERTIARY INSTITUTION(S) ATTENDED	1	
		2	

2.20	CERTIFICATES/ DEGREES OBTAINED	DATES
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2.21	PRIMARY SCHOOL(S) ATTENDED	1		
2.22	SECONDARY SCHOOL(S) ATTENDED	1		
2.23	TERTIARY INSTITUTION(S) ATTENDED	1		
		2		
		3		

### 3.0 EMPLOYMENT (fill all in CAPITAL LETTERS)

3.10 EMPLOYMENT HISTORY		DATES
3.11	NAME OF EMPLOYER	FROM:
	ADDRESS OF EMPLOYER	
	TELEPHONE NO.	TO:
	E-MAIL ADDRESS	
	POSITION HELD	
3.12	NAME OF EMPLOYER	FROM:
	ADDRESS OF EMPLOYER	
	TELEPHONE NO.	TO:
	E-MAIL ADDRESS	
	POSITION HELD	
3.13	NAME OF EMPLOYER	FROM:
	ADDRESS OF EMPLOYER	
	TELEPHONE NO.	TO:
	E-MAIL ADDRESS	
	POSITION HELD	
3.14	NAME OF EMPLOYER	FROM:
	ADDRESS OF EMPLOYER	
	TELEPHONE NO.	TO:
	E-MAIL ADDRESS	
	POSITION HELD	

## 4.0 OTHER INFORMATION (fill all in CAPITAL LETTERS)

### 4.10 SESSION OF INTEREST (please tick one)

4.11      SESSION 1               SESSION 2               SESSION 3               SESSION 4

### 4.20 REASON(S) FOR APPLICATION INTO THIS PROGRAM?

4.21

4.22

4.23

### 4.30 ANY PREVIOUS EXPERIENCE IN FURNITURE MAKING? (please tick one)

YES       NO

4.31 If Yes, give details

### 4.40 ANY CRIMINAL CONVICTION? (please tick one)

YES       NO

4.41 If Yes, give details

### 4.50 ANY HEALTH CHALLENGES? (please tick one)

YES       NO

4.51 If Yes, give details of the health challenges (please be specific)

### 4.60 ANY FORM OF DISABILITY? (please tick one)

YES       NO

4.61 If Yes, give details of disability (please be specific)

## 5.0 GUARANTORS (fill all in CAPITAL LETTERS)

PLEASE NOTE THAT IT IS DANGEROUS TO GUARANTEE SOMEONE NOT KNOWN TO YOU!

### 5.10 GUARANTOR 1

5.11 SURNAME

5.12 OTHER NAMES

5.13 TELEPHONE


5.14 CONTACT ADDRESS

  

5.15 E-MAIL

5.16 MODE OF IDENTIFICATION

5.17 ID NUMBER

5.18 SIGNATURE

### 5.20 GUARANTOR 2

5.21 SURNAME

5.22 OTHER NAMES

5.23 TELEPHONE


5.24 CONTACT ADDRESS

  

5.25 E-MAIL

5.26 MODE OF IDENTIFICATION

5.27 ID NUMBER

5.28 SIGNATURE

## 6.0 DECLARATION (fill all in CAPITAL LETTERS)

I, \_\_\_\_\_ hereby affirm that all documents and information provided by me are true and legal.

\_\_\_\_\_  
**SIGNATURE OF CANDIDATE/ DATE**

## 7.0 INSTRUCTIONS

### 7.10 PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY.

- 7.11 Complete all sections of the Application form.
- 7.12 Complete sections clearly with **BLOCK LETTERS** using only blue ink pen.
- 7.13 State clearly the session you wish to enroll in; you can only select one session for every application as each sessions will be treated with a new application.
- 7.14 Every completed Application Form with all supporting documentation should be put in an envelope and address it to:  
**Chairman DCT Admission Committee**  
**No 6 Alexandria Crescent**  
**Berger paint plaza**  
**Suite GF5B, Wuse 2, Abuja.**  
**info@dazzlecarpentry.training**
- 7.15 This application form should be submitted with the following:  
a. Photocopies of candidate's **Educational certificates or proof of any qualification** claimed  
b. **Two passport photographs** taken within the last six months  
c. Original photocopy of **court affidavit** where there is any discrepancy with names (if applicable)  
d. Photocopy of **marriage certificate** and **newspaper page** where change of name was published (if applicable)

### 7.20 Closing dates for applications

Applications for education courses are assessed on a continuous basis and offered to the next available intake. Applications are strongly encouraged to take advantage of this by lodging their application as early as possible, noting the closing dates shown below.

Places are offered to eligible applicants on a first-received basis and, if the course offering is subject to a quota. Applications received after the closing date will be considered where places remain available and early residential schools can be attended.

#### CLOSING DATES:

Session 1	One-time application	30th, January
Session 2	One-time application	_____
Session 3	One-time application	_____
Session 4	One-time application	_____

*Note that the submission of this form and all documents is not a guarantee for getting an admission as selected candidates will be invited for a screening exercise to admit successful candidates.*

The personal information you provide will not be made available to any other person or organization outside of the DFL or for any other purpose without your consent or where authorized by law, and will be disposed of in accordance with Government regulation.

## 8.0 TRAINEE/ APPLICANT PHOTO AND RECORDING RELEASE

I, \_\_\_\_\_, understood the programme and wishes to enroll to improve in my skill. Wishing to support the programme by giving my consent as per the above mentioned, I state comprehensively:

- 8.10 That in consideration of my admission into the **Dazzle Carpentry Training Ltd** programme in the Company and as part of the services being furnished by me to the said Company, I hereby give my consent to the photographing or video recording of myself and to the recording of my voice.
- 8.11 The Company is hereby authorized to use or cause to be used said still photographs or motion picture footages, recordings of my voice and my name for advertising, publicity, commercial or other business purposes. Said photographs, videos and/or recordings may be used singularly or in conjunction with other photographs, video and/or recordings. ALSO, the Trainee/applicant hereby authorizes the Company to edit these recordings at its discretion, and to incorporate these recordings into movie and sound films or audio – and videotapes, broadcasts (radio and television, including cable and satellite transmissions) programs, or otherwise, and to use and license others to use it.
- 8.12 The Company has my authorisation to reproduce, or cause to be reproduced such photographs and voice recordings. The same may be exhibited in all domestic and foreign markets. I understand that others may use and/or reproduce said photographs and/or recordings with or without the Company's consent.
- 8.13 I hereby release the Company, any of its associated or affiliated companies, their directors, officers, agents, employees, customers and the Company's appointed advertising agencies, officers, directors, agents and employees, from all claims of any kind on account of such use.

In the light of the above my consent is given with my signature below.

\_\_\_\_\_  
Trainee/ Applicant signature and Date

### FOR OFFICIAL USE ONLY