CHARTERED INSTITUTE OF MANAGEMENT ACCOUNTANTS (CIMA)

7, Western Avenue, 3rd Floor at Ojuelegba Plaza, Beside Union Bank Plc. Ojuelegba, under bridge, Surulere, Lagos – State

In Collaboration with

CORNERSTONE UNIVERSITY & SEMINARY JERUSALEM, ISRAEL

IN

A UNIVERSITY – MONITORED PROFESSIONAL ACCOUNTING PROGRAMME

APP NO. 231

APPLICATION FORM

Passport Photograph

NAME: (MR/ MRS/ MISS: ----------
SURNAME OTHER NAMES

DATE OF BIRTH: ---------- NATIONALITY: ---------- MARTIAL STATUS: ----------

CONTACT ADDRESS: ----------

NAME & ADDRESS OF NEXT OF KIN: ----------

RELATIONSHIP OF NEXT OF KIN: ----------

INSTITUTIONS ATTENDED WITH DATES (State year and mode)

Name of Institute	Date FROM T O	Mode Part/ Full Time	Certificate Obtained

PROFESSIONAL QUALIFICATIONS OBTAINED WITH DATES:
(State stage, year and subject grades)

Are you registered student Member of CIMA Yes/ No

ARE YOU BEING NOMINATED FOR SPONSORSHIP BY YOUR ORGANIZATION?
(Tick as Appropriate) Yes [ ] No [ ]

CERTIFICATION:

I certify that the information on this form is to the best of my knowledge correct and that any incorrect or misinformation discovered at any stage of the study renders my admission invalid.

_____ _____

NAME AND SIGNATURE DATE