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Name -----

State of origin -----

LGA -----

Phone -----

E-mail -----

Educational qualification -----

Course of study -----

Country of study -----





Please give details of any English language qualification you have obtained e.g. IELTS or TOFEL

Date of Examination	Name of Examination	Results

BSc (TOEFL)

Date of Examination	Name of Examination	Results

Masters / PhD (TOEFL and GRE)

Date of Examination	Name of Examination	Results

DFECLARATION

We confirm that, to the best of our knowledge, the information provided by us in this form is correct and complete. We have read and understood the instructions clearly and abide to all the terms and conditions as stipulated.

Applicant's Signature
Date

Parent/Guardians Signature
Date



**Application Fee is N100, 000**

**BANK DETAILS**

**Banker:** United Bank for Africa (UBA)  
**Account Number:** 1022224900  
**Account Name:** Innovative City Development Foundation