

THE CHARTERED INSTITUTE OF TAXATION OF NIGERIA



(Chartered by Act No. 76 of 1992)

APPLICATION FOR REGISTRATION AS A STUDENT OF FOUNDATION AND PROFESSIONAL SCHEME

Form No: PROF/0001

For Office Use Only

Student's Reg. No.....

*Affix two (2)
certified Passports
here*

To: The Registrar/CE
4th Floor Lagos Chamber of Commerce
and Industry Building,
Plot 10 Nurudeen Olowopopo Drive,
Central Business District, Alausa,
Ikeja Lagos

PART 1

(To be completed in full by the Applicant)

1. SURNAME.....MAIDEN NAME
2. OTHER NAMES
3. SEX
4. DATE OF BIRTH
5. (a) POSTAL ADDRESS

(Use the address where posted mails can easily reach you)

- (b) HOME ADDRESS
- (c) TELEPHONE NO.
- (d) E-MAIL ADDRESS

6. EDUCATIONAL QUALIFICATION(S) WITH DATES
- (Attach photocopies certified by your Referees)*

7. (a) FOR APPLICANT IN FULL TIME EMPLOYMENT

- i) EMPLOYER'S NAME AND ADDRESS
- ii) NATURE OF EMPLOYER'S BUSINESS
- iii) DATE/YEAR OF EMPLOYMENT*(Attach letter of Attestation)*
- iv) CURRENT POSITION

8. DECLARATION BY APPLICANT

I, hereby declare that the information given on this form is correct and I agree to abide by the rules and regulations of the Institute if my application is successful.

I enclosed the following necessary documents:

- i) Certified photocopy of Birth Certificate or Sworn Declaration of Age;
- ii) Certified photocopies of Educational qualification(s);
- iii) Certified photocopies of NYSC Certificate/NYSC call up letter or Confirmation letter of service from place of primary assignment.

- iv) Receipt/evidence of payment of a non-refundable fee of N 1,000 processing fee and N500 building fund;
- v) Two (2) 9" x 4" self-addressed stamped envelopes; and
- vi) Two certified photocopies of marriage certificate, where necessary.

.....
Signature

.....
Date

PART II

(To be completed by applicant's Referee)

10. REFEREE'S ENDORSEMENT

I, the undersigned, certified that the information contained in this application form are to the best of my knowledge correct.

I further state that the applicant, Mr./Mrs./Miss
is of good character and in my opinion, a fit and proper person to be admitted as a student of the Chartered Institute of Taxation of Nigeria.

SURNAME

OTHER NAMES

OFFICE NAME AND ADDRESS.....

.....

.....

TELEPHONE NO

E-MAIL ADDRESS..

MEMBERSHIP NO..... STATUS

(Associate or Fellow)

SIGNATURE..... DATE

.....
(Please affix official rubber stamp here)

PART III
CHECK LIST

FOR OFFICIAL USE ONLY		
	VERIFIED BY	DATE
1. Certified Passport Photograph		
2. Certified Photocopies of Educational Certificate(s)		
3. Certified Photocopy of Birth Certificate/Age Declaration		
4. Evidence of Payment Receipt Attached: Number Amount N Date	YES/NO	
5. Official Remarks and Signature	(i) Application accepted	
	(ii) Application written to correct deficiencies	
	(iii) Application Rejected	
	(iv) Application recommended for approval	
	(v) Application approved by Council on.....	
	(vi) Certificate dispatched on.....	

Note:

1. The Institute does not permit change of names(s) except those consequent upon change in marital status in the case of women;
2. Applicant must therefore ensure that he/she record his/her names in the same order and spelling in all his/her correspondence with the Institute;
3. The minimum entry qualification for registration is a B. Sc or HND in any discipline from a recognized institution.
4. For those submitting the completed form by hand, please call at our
Secretariat Office

The Registrar/CE
4th Floor Lagos Chamber of Commerce and Industry Building,
Plot 10 Nurudeen Olowopopo Drive,
Central Business District, Alausa,
Ikeja Lagos.