



THE CHARTERED INSTITUTE OF TAXATION OF NIGERIA

TAXATION TECHNICIANS' SCHEME EXAMINATION ENTRY FORM

EXAM NO:.....
(OFFICIAL USE)

*Affix 2
Passports
Here
Certified by
Member*

NAME OF CANDIDATE:.....
(Surname first)
REGISTRATION NUMBER:.....
CONTACT ADDRESS:.....
PHONE NUMBER:.....
E-MAIL:.....
QUALIFICATION(S):.....

STAGE	SUBJECT ENTERED FOR	FEE PER SUBJECT	TOTAL AMOUNT
STAGE 1			
1. ECONOMICS	<input type="text"/>	1,500.00	
2. ACCOUNTING	<input type="text"/>	1,500.00	
3. ELEMENT OF BUSINESS LAW	<input type="text"/>	1,500.00	
4. INTRODUCTION TO TAXATION	<input type="text"/>	<u>1,500.00</u>	
SUB-TOTAL			
STAGE 2			
1. MANAGEMENT INFORMATION SYSTEM	<input type="text"/>	2,000.00	
2. PERSONAL TAXATION	<input type="text"/>	2,000.00	
3. BUSINESS TAXATION	<input type="text"/>	2,000.00	
4. BUSINESS MANAGEMENT	<input type="text"/>	<u>2,000.00</u>	
SUB-TOTAL			
ADD THE FOLLOWING FEES:			
1. FORM FEE			500.00
2. REGISTRATION FEE (<i>Non Refundable</i>)			3,000.00
3. ANNUAL SUBSCRIPTION			1,000.00
DATE:.....			
SIGNATURE:.....			

P.T.O.

Please Tick



to indicate your choice of Examination Centre

ABUJA

BENIN

KADUNA

LAGOS

IBADAN

ENUGU

PORT/ H

KANO

LAST EXAMINATION DIET:..... EXAM NO:.....

Declaration by candidate:

I, hereby declare that the information given on this form is correct and I agree to abide by the Institute's examination rules and regulations.

SIGNATURE:.....DATE:.....

FOR OFFICE USE ONLY

ITEMS TO ACCOMPANY FORM

1. PHOTOCOPY OF LETTER OF REGISTRATION

2. PHOTOCOPY OF RESULT OF LAST EXAMINATION

(IF ANY)

3. TWO (2) PASSPORT PHOTOGRAPHS

4. TWO (2) SELF ADDRESSED STAMPED ENVELOPES

5. PHOTOCOPY OF EXEMPTION CERTIFICATE (IF ANY)

6. PHOTOCOPIES OF EDUCATIONAL CERTIFICATES

7. EVIDENCE OF PAYMENT OF ALL PRESCRIBED

EXAMINATIONS FEES

Examination Officer Signature

Date