

EMPLOYMENT REGISTRATION INFORMATION FORM

BIO-DATA (Please provide accurate information about you)

FULL NAME			
SEX			
DATE OF BIRTH			
RESIDENCE			
MOBILE PHONE		HOME PHONE	
Email - Address			
JOB POSITION			

STAFF PHOTO

STAFF RELATIVES (Please provide atleast two relatives)

(1) RELATIVE NAME			
RELATIONSHIP			
RESIDENCE			
PHONE NUMBER (s)			
(2) RELATIVE NAME			
RELATIONSHIP			
RESIDENCE			
PHONE NUMBER (s)			

ACADEMICS RECORDS (Please list your academic qualifications starting from the Lowest attained)

INSTITUTION	QUALIFICATION GAINED	YEAR STARTED	YEAR ENDED

DATE MADE: _____

Signature: _____