



UNIVERSITY OF IBADAN

Consultancy Services Unit

PROFESSIONAL POST GRADUATE DIPLOMA IN AUCTIONEERING

APPLICATION FORM

Passport
Photograph

PERSONAL DETAILS

Surname _____

Other Names _____ Title (Mr/Mrs/Dr/Chief _____)

Date of Birth _____ State of Origin _____ Nationality _____

Home Address _____

Home Telephone Number(s) _____

Business/Office Address _____

Day Time Telephone Number _____

Email Address _____

EDUCATIONAL/ACADEMIC BACKGROUND

Please state where educational qualifications obtained and Professional Memberships

DATE	School/University/College(s) Attended	Qualification Obtained

Please enclose photocopies of your certificate as proof of educational status

DETAILS OF WORKING/BUSINESS EXPERIENCE

Please state the name and address of your past/present business employer(s). In case of qualified professional in practice, please state the name and address of your business

DATE	Emplyer/Name of Business	Type of Business	Post Held

I certify that the particulars giving in this application form are correct. I know of no reason why I should not be regarded as fit and proper person to be considered for admission into Professional Post Graduate Diploma in Auctioneering programme of the University of Ibadan Consultancy Unit.

Signature _____ Date _____

FOR OFFICE USE ONLY

	Tick	Date
Passport Submitted		
Credentials Received		
Full Payment Received		
Admission Letter Dispatched/Notified		