

APPLICATION FORM

This Form should be completed carefully and returned as directed.



PART 1: PERSONAL PARTICULARS

1. Surname of Applicant (Dr./Mr./Mrs./Miss)...
(BLOCK LETTERS)
Other Names:.....

2. Sex..... Date of Birth.....

3. Place of Birth..... Nationality State of Origin (in case of Nigerians)

4. Present Address.....

5. E-mail Address..... Tel. Nos.....

6. Permanent Address.....

7. Marital Status.....

8. Number and Ages of Children: Son(s)

Daughter(s)

9. Are you bonded to serve any government or other employers?

Yes/No..... If YES give details:

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PART II: DETAILS OF EDUCATION

10(a) Primary (State names of Institutions) From To

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(b)	Secondary (State names of Institutions)	From	To

(c) Certificates Obtained (State clearly the subjects offered, the grade obtained and the overall grading where Applicable)

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11(a)	University (State names of Institutions)	From	To

(b) Degrees obtained (State clearly the subject area, class, Distinction or other Honours and the date each degree was awarded)

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12(a)	Other Institutions (State names of the institutions)	From	To

- (b) Certificates, Diplomas or Advanced Degrees obtained
 (In each case state the level or class of certificate, Diploma or subject area in the case of advanced degree and the date each was awarded).

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- 13 List Publications (if any)

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PART III: DETAILS OF EMPLOYMENT

14. List hereunder, beginning from your current employment. ALL jobs you have worked at, stating dates, positions held, salaries and reasons for leaving where applicable.

NAME AND ADDRESS OF ORGANISATION	DATES	POST HELD	SALARY	REASON FOR LEAVING

15. Do you object to any contact being made with your present employers? YES/NO.....

If YES state reason(s)

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PART IV: REFERENCES

16. Give the names, address and occupations of THREE personal referees (not relations) to whom you are well-known. They must include at least a former teacher or professor.

(1) Name:.....

Address:.....

Tel No.....

Occupation:.....

(2) Name:.....

Address:

Occupation:.....

(3) Name:.....

Address.....

Tel No.....

Occupation:.....

Note: The consent of the persons named as referees should be obtained by the applicant, and each referee should be requested to forward his/her reference to the Director (HRM), WAEC, Headquarters, Accra, through the Head of Council's Office in the applicant's home country.

17. State in the space provided, in about 200 words, why you want to join the Council.

Date..... Signature of Applicant.....