

ICL SUPPORT SERVICES LIMITED

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Tel: (01) 4530065, 07059584200, 08170732700

26B, Oyedele Ogunniyi Street, By Prince of Anthony Hotel, Fax: (01) 2702520 Email: infoiclssl@iclgroupng.com

EMPLOYMENT FORM

CONFIDENTIAL

To be completed in Block letters please

	DATE:
1.	Name (Surname)First) Surname First Name Other
2	Surname First Name Other If applicable, maiden name:
	Sex: 4. Title Mr. Mrs. Miss:
	Marital status, circle correct one: Single, Married, Widowed, Separated, And
	Divorced
6.	Date of Birth: 7. Village:
	State of Origin: 9. Local Govt. Area:
	If applicable, Date of arrival in Nigeria:
11.	Present Residential Address:
12.	Home Town Address:
13.	Father's Name and Age:
	Mother's Name and Age:
	Annual House Rent:
16.	Name and Address of Landlord:
17.	If married, name of spouse:
18.	Spouse's employment address:
19.	Spouse's Occupation:
20	Name of spouse's employer:

S/N	Name(in full)	Date of birth	Address of school attended		Amt spent to maintain child annually		Sex
a							
b							
c							
d							
e							
22.	No of people (n	ot children) that	t you m	aintain:			_
23.	Dependants:						_
	Details:						
S/N	Name(in full)	Relationship t	o you	Age or relative Amt spent t		Amt spent to	
		or your spo	use	maintair		maintain	
a b							
c							
d							
e							
U.							
24a.	Next of kin: _						
24b.	Address of nex	xt of kin:					
24c.	. Relationship to next of kin:						
25a.	. Schools/Institutions attended with date's						
					. , ,		
					. , , ,		
25b.	o. Qualification: Course of Dicipline: Class of Grade						
26. Work experience (Give details of present and previous employment, n							

27.	FITNESS:						
a.	Details of illness, chronic ailm	nent or disability in	n past five (5) years	:			
b.	Serious illness, injury or opera	ation prior to last f	ive years:				
c.	Is your hearing or vision impa	ired YES or NO (i	if yes give details):				
28.	WORKING RECORD						
	Note: Disclosure of conviction does not mean you will automatically be barred from employment, but failure to disclose would however mean subsequent dismissal.						
a.							
	Have you been entrusted with sensitive duties?						
c.	Has any Package, Equipment or	Property in your ch	arge ever been stolen	n? If so give details:			
29.	Hobbies:						
30.	Any other relevant information:						
31.	Guarantors:						
	Name	Residential Address	E-mail Address	Telephone			
1.							
2.							

3.

I apply for employment and vouch that the preceeding details are correct.
I understand that discovery of misrepresentation; fake credentials or unsatisfactory
references shall lead to my immediate dismissal.
Name:
Signature:

Telephone: