

GUARANTOR'S UNDERTAKING FORM

THIS FORM MUST BE COMPLETED IN THE GUARANTOR'S OWN HANDWRITING.

PLEASE READ CAREFULLY BEFORE FILLING AS YOU ARE UNDER AN OATH

NOTE: As a guarantor, you will be contacted for verification and will be visited at your Home address or Office address for physical verification as it is a requirement before offer letter is given to the Applicant.

COMPETENCY: The person filling out this form must be of sound mind; must have known the applicant on a personal level for at least five years, must be over 25 years of age; must be able to read and write, must have good history and financial stability; must be resident in Lagos or area where the applicant is employed with evidence of utility bills; must be a homeowner or a trusted tenant and be resident in the same location for at least 3 years; must be in a position to supply more information about applicant when

required; must provide a passport photograph with name and signature at the back, must provide photocopy of valid National Identity Card OR Voter's Card OR National/ International Passport OR Driver's License, and must be any of the following:

Civil Servant/Staff of Reputable Company	He/She must be a Senior Officer with an Annual Gross Pay of at least N2,000,000.00 (Two Million Naira Only) and must provide a valid Official/Work ID Card along with the above means of ID.
Practicing Professionals	He/She must have at least 5 years working experience and must provide a valid Work ID Card along with the above means of ID.
Traditional Rulers or Reputable Clergymen	Must have a valid ID Card or Ordination Badge evidencing title, position held and station.
CEO / Owners of Registered Company /Business with CAC	Must have an annual turnover of N5,000,000 (Five Million Naira Only)

Please Note: Security guards, Drivers, Clerks, Cleaners, Gardeners, Office Assistants, Stewards, Cobblers and the likes are not eligible.

To be filled by the Applicant/ Potential Employee:

NOTE: Please ensure that your guarantors provide accurate and detailed information, as wrong, unverifiable or incomplete information may lead to termination of offer.

Having read the content and requirement of this form, I have understood same and hereby accept the terms and conditions contained herein.

Name of Applicant/ Potential Employee:	
Address of Applicant/Potential Employee:	
Signature and Date:	

PLEASE DO NOT GUARANTEE SOMEONE NOT WELL KNOWN TO YOU FOR A MINIMUM OF 5 YEARS



To be filled by the Guarantor (Kindly ensure form is completely and properly filled):

GUARANTOR'S DATA TITLE: Name [SURNAME, Other Names]: Religion: _____ Residential address: Nearest Bustop/Landmark: _____ Phone number: _____ Email address: Relationship Kindly underline your valid means of identification as provided below only, and provide a photocopy. NATIONAL OR INTERNATIONAL PASSPORT / DRIVER'S LICENCE / VOTERS' CARD / NATIONAL ID **ID** Number: _____ Place of Employment/Organization: Occupation/Profession/Job title: Address: Nearest Bus Stop /Landmark: _____ **DECLARATION** I _____ hereby certify that the information contained herein is correct, true and accurate. I confirm that the Applicant [Mr./Mrs./Ms.] of [Applicant's Address] ____ has been known to me for _____ (numbers of) years as _____ [state relationship to applicant].

I further declare that all information and means of identification attached are valid and authentic, and I shall inform the company on any change in this.

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I further confirm that all the details of the applicant given are valid and correct, and I shall inform the company of any change in this.

I further certify that the applicant is of good character, fit and proper to be considered for employment, and as such, I accept to be his/her Guarantor, shall him/her, and keep the company and/or its subsidiaries, related companies, and any other firm where he/she is employed for any loss or liability suffered or incurred as a result of the action, omission, malpractice, negligence and/or fraud by the Applicant should the need arise throughout the course of his/her employment, and immediately after his/her employment if proven related to his/her employment.

If I am unable to produce him/her for any loss or liability arisen, suffered or incurred in the course of his/her employment, and if he/she is unable to remedy or refund with a stipulated time in his own capacity, I as the Guarantor accepts to remedy or refund the loss or liability suffered by having a minimum amount on the cheque issued in my bank account at all times.

I hereby affirm that this declaration is made in good faith, conscientiously believing same to be true and correct in accordance with the Oaths Law of Nigeria

Guarantor's Signature/Date

Before me

NOTARY PUBLIC / COMMISSIONER FOR OATHS

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