



WHOBA OGO FOUNDATION TUITION FREE ICT TRAINING

GUARANTOR'S FORM

NAME OF STUDENTS: _____

SEX: _____ **MARITAL STATUS:** _____ **NATIONALITY:** _____

TELEPHONE NO: _____ **EMAIL:** _____

HOME ADDRESS: _____

COURSE APPLIED: _____

DATE OF ADMISSION: _____

GUARANTOR'S DECLARATION

I, _____

(SURNAME)

(OTHER NAMES)

Of: _____

(PERMANENT RESIDENTIAL ADDRESS)

NAME & ADDRESS OF PLACE OF WORK: _____

TELEPHONE NUMBER: _____ **EMAIL:** _____

I CONFIRM THAT _____ IS WELL KNOWN TO ME. I HAVE KNOWN HIM/HER FOR A PERIOD OF _____ YEARS.

**I HEREBY STAND AS THE GUARANTOR
TO _____ AND THAT I IRREVOCABLY AND
UNCONDITIONALLY GUARANTEE TO INDEMNIFY WHOBA OGO FOUNDATION FOR ANY
LOSS THE SAID STUDENT MAY CAUSE THE FOUNDATION IN HIS/HER CAPACITY AS A
STUDENT/PARTICIPANT AND AGREE TO BEAR ANY LIABILITIES THAT WILL RESULT FROM
HIS/HER PARTICIPATION IN THE WOF ICT TRAINING.**

**PROVIDED HOWEVER, THAT THE LIABILITY OF THE GUARANTOR SHALL ONLY ARISE
WHERE THE STUDENT HAS FAILED OR NEGLECTED TO SETTLE THE LOSS OR INDEMNIFY
THE WOF ICT TRAINING CENTER.**

(SIGNATURE OF GUARANTOR)

(DATE)

**NOTE: A PHOTOCOPY OF THE GUARANTOR'S MEANS OF IDENTIFICATION SHOULD COME
ALONG WITH THE FORM.**