



SECTION 4 SALARY STRUCTURE

\*FGN Treasury Funded MDAs only

Harmonised Salary Structure as at 2004  
(eg HAPSS, HATISS)

Consolidated Salary Structure  
(e.g CONPSS, CONTISS)

\*Consolidated Salary Structure as t 2010

GL as at June 2004

Step as at June 2004

GL as at Jan 2007

GL as at 2010

Step as at 2010

Current Salary Structure

Current GL

(Eg.CONTISS)

SECTION 5 NEXT OF KIN DATA

\*Title

\*Surname

\*First Name

\*Middle Name

\*Relationship

Gender

Correspondence ADDRESS NIGERIA, ABROAD

Nigeria

Abroad

F/M

\*House No/Name

\*Street Name

\*Village/Town/City

\*Local Govt Area Code

\*Country (If based abroad)

\*State of Residence

\*Email address

P.O. Box or PMB (If any)

\*Zip Code/Postal (If living abroad)

\*Phone no Country code (Tel)

Mobile Number

SECTION 6 EMPLOYER'S CONFIRMATION

I confirm that the within-named person is/was an/a employee/retiree of

.....And the information provided by him/her is true and correct to the best of my knowledge

\*Name:

\*Designation

\*Signature

\*Date.....

SECTION 7 APPLICANT BIOMETRIC/CERTIFICATION

(10 Fingerprints, Photograph and Signature to be captured ELECTRONICALLY only!)

Certification by employee

I

.....

Hereby certify that the information provided by me in this form is true and correct

Signature

Date.....

SECTION 7 FOR OFFICIAL USE ONLY

Does the contributor have any fingerprint challenge?

Yes

No

Form Reference Number

Complete

Partial

Others

Yes

No

Please tick

Are supporting documents attached?

SECTION 8 PFA CERTIFICATION

\*I hereby certify that the information given above is correct to the best of my knowledge

\*Name:

\*Designation

\*Signature

\*Date.....

NOTES:

\*Indicates Mandatory fields

\*\*Indicates Conditional Mandatory fields