



NIGERIAN NAVY

2020 Enlistment Exercise

Application Form



Application Number:

DSSC28/2020/ABI/2365/0081058

Department: HYDROGRAPHY

Specialisation

Cartography

National Identification Number: 87391231281

Exam Centre: Lagos

Location: Nigerian Navy Secondary School, Navy Town Ojo.

Title: MR

Surname: ONUOHA

First Name: PETER

Other Name: CHIMAOBI

Religion: christianity

Marital Status: Single

Gender: Male

Date Of Birth: 1/5/1994

State of Origin: ABIA

LGA of Origin: Aba North

Home Town: Umuada nwosi

Mobile Number: 08166867486

Height(Meters): 1.84

No. of Children:

Hobbies: Swimming
,coding,travelling

Email:

onuohapeter1994@gmail.com

Permanent Address No. 5 bourdex avenue,ogbor-hill aba,Abia State

Contact Address No. 17 Aiyegun street,surulere LGA,Lagos state

Next of Kin's Information

Full Name: MR PETER
ONYEBUCHI ONUOHA

Relationship: FATHER

Occupation: RETIRED CIVIL
SERVANT

Mobile Number: 08063697435

Post: Assistant Director

Email:

Contact Address: No. 5 bourdex avenue . Ogbor-hill Aba,Abia state

Parent's / Guardian's Information

Full Name: MR & MRS PETER ONYEBUCHI
ONUOHA

Residential Address: No. 5 Bourdex
Avenue,Ogbor-hill Aba,Abia State



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Referees

Referee Name	Referee Address	Referee Phone
Dr. Bayo Adekanbi	19 WILLIAMS ONOH DRIVE,CHEVYVIEW ESTATE,LEKKI ,LAGOS.	08032008462
Dr. Anthony J. Illozhobie	UNIVERSITY OF CALABAR STAFF QUATERS	08075222935

Primary Details

School	Qualification	From	To
Charles Walker international nursery and primary sch,Calabar	FSLC (FIRST SCHOOL LEAVING CERTIFICATE)	1996	2003

Secondary Details

School	Qualification	From	To
Total Knowledge international school of Art & Science	WASSCE(WAEC)	2003	2010

Tertiary Details

Institution	Course of Study	Type	From	To	Classification
University of Calabar,Cross River State.	Applied Geophysics	Degree	2012	2016	Pass



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SSCE / NECO / WASSCE / GCE

Nysc Number: A003753564

Exam Number: 4010189263

Subject	Grade
Mathematics	C4 CREDIT
Chemistry	B3 GOOD
Agricultural Science	B3 GOOD
Igbo	B3 GOOD
Economics	B3 GOOD
Biology	C4 CREDIT
Geography	A1 EXCELLENT
Physics	B2 VERY GOOD
English	C6 CREDIT

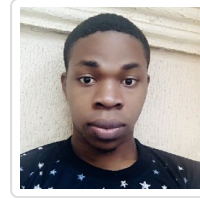


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APPLICANT'S DECLARATION



Application Number: DSSC28/2020/ABI/2365/0081058

I ONUOHA PETER, hereby declare that the information given in this application is true and that if found to be false I should be prosecuted.

Signature: _____

Date: _____

Certification by Parents / Guardian

I _____ parent/guardian of _____, who is applying for recruitment into the Nigerian Navy, hereby certify that I fully understand that my child/ward will (if required to) attend the Recruitment Exercise and I shall not demand compensation or relief from the Government in respect of death or any injury which my child/ward may sustain in the course of or as a result of any task given to him/her during the exercise.

Parent / Guardian

Name: _____

Address: _____

Signature: _____

Date: _____

Witness

Name: _____

Address: _____

Signature: _____

Date: _____

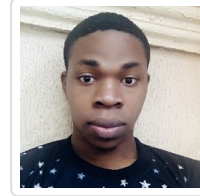


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LOCAL GOVERNMENT AREA CERTIFICATION



Application Number: DSSC28/2020/ABI/2365/0081058

Title: MR

Surname: ONUOHA

First Name PETER

Other Name CHIMAOBI

Religion christianity

Marital Status Single

Date Of Birth: Wednesday, January 5, 1994

Gender Male

State of Origin: ABIA

LGA of Origin: Aba North

Home Town Umuada nwosi

Mobile Number 08166867486

Height(Meters) 1.84

Email: onuohapeter1994@gmail.com

Permanent Address No. 5 bourdex avenue,ogbor-hill aba,Abia State

Certification by LGA Chairman / Secretary Or Senior Military Officer not below the rank of Commander or equivalent Or Chief Superintendent Of Police from Applicant's State of Origin

I certify that the applicant _____ is an indigene of _____ L.G.A, _____ State, and that to the best of my knowledge and belief, the facts stated on the form are correct. I hereby declare that if any statement made in connection with this application is proven to be false I should be prosecuted.

Name:_____

Address:_____

Signature:_____

Date:_____

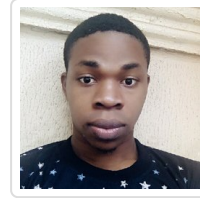


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POLICE CERTIFICATION



Application Number: DSSC28/2020/ABI/2365/0081058

Title: MR

Surname: ONUOHA

First Name PETER

Other Name CHIMAOBI

Religion christianity

Marital Status Single

Date Of Birth: Wednesday, January 5, 1994

Gender Male

State of Origin: ABIA

LGA of Origin: Aba North

Home Town Umuada nwosi

Mobile Number 08166867486

Height(Meters) 1.84

Email: onuohapeter1994@gmail.com

Permanent Address No. 5 bourdex avenue,ogbor-hill aba,Abia State

Certification by Divisional Police Officer

I certify that the applicant _____ is an indigene of _____ Town,
_____ L.G.A, _____ State and that his/her parent hails from
_____ L.G.A. of _____ State. That he/she has no criminal record on him/her. (If
any state briefly

That to the best of my knowledge and belief the facts stated in the form are correct and I hereby declare that
if any statement made in connection with this application is proven to be false I should be prosecuted.

Name: _____

Address: _____

Signature: _____

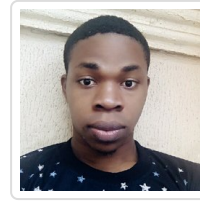
Date: _____



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2020 Enlistment Exercise

GUARANTOR'S FORM



Application Number: DSSC28/2020/ABI/2365/0081058

Title: MR

Surname: ONUOHA

First Name PETER

Other Name CHIMAOBI

Religion christianity

Marital Status Single

Date Of Birth: Wednesday, January 5, 1994

Gender Male

State of Origin: ABIA

LGA of Origin: Aba North

Home Town Umuada nwosi

Mobile Number 08166867486

Height(Meters) 1.84

Email: onuohapeter1994@gmail.com

Permanent Address No. 5 bourdex avenue,ogbor-hill aba,Abia State

Particulars of Guarantor

Surname: _____ First Name: _____

Middle Name: _____ Town: _____

LGA: _____ State of Origin: _____

Mobile: _____ E-mail: _____

Appointment: _____ How long have you known the candidate: _____

Formation/Unit/Office Address: _____

Residential Address: _____

Contact Address: _____

Name: _____

Address: _____

Signature: _____

Date: _____

This form is to be filled by a **Military Officer not below the rank of Lt Col or equivalent/Police Officer not below the rank of Chief Superintendent of Police/Assistant Director at either Federal or State Civil Service** certifying the eligibility of the applicant. You need not to come from an applicant's State of Origin to guarantee him/her only be sure of the character. Please note that inability to confirm the above given information about you, will lead to automatic disqualification of the candidate.

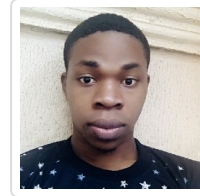


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FOR OFFICIAL USE ONLY



Application Number: DSSC28/2020/ABI/2365/0081058

Applicant's Full Name: ONUOHA PETER

Date Received: _____

Education Qualification: Number Of Credits/Passes obtained (SSCE / GCE / WASCE / NECO): _____

Documents Attached

- a) _____
- b) _____
- c) _____
- d) _____
- e) _____

Detailed Result

Medical fitness: _____

General aptitude test score: _____

Vocational aptitude test score: _____

Remark

Director

Rank: _____

Name: _____

Signature and Date: _____

Rank: _____

Name: _____

Signature and Date: _____