



BINGHAM UNIVERSITY (ECWA)
KM 26 ABUJA-KEFFI EXPRESSWAY,
P.M.B 005, KARU, NASARAWA STATE, NIGERIA

APPLICANT'S CONFIDENTIAL REPORT

To be completed by applicant's Employer/School Principal (fill all applicable space)

Applicant to note that no application form will be processed if the appropriate officer does not complete this section.

- i. Name of Applicant.....
- ii Date of Birth (as reflected in applicant's records).....
- iii Present status and Applicant's Salary (if working).....
- iv. How long has the applicant been in your employment or department or school?.....
- v. If a student, year of entry and year of graduation?-----
- vi. The enclosed certificate/statement of results have been verified from the issuing body. If yes, please state result of the verification exercise.....
- vii. Academic ability (if possible, assessing capabilities in subjects relevant to course desired)
.....
- viii. If this candidate applies to your institution, would you accept him/her? Yes ☐ No ☐
- ix. Any other information (e.g. personal or domestic circumstances) about the applicant which would help the University decide suitability for the course of study for which he/she has applied.

- x. If admitted, are you prepared to release the candidate for the course?.....

I certify on my honor and as a responsible officer that the above information voluntarily given by me is correct.

Name.....

Organization Designation:.....

Postal Address:-----

E-mail address:----- Phone No.-----

Signature: Date: