NIGERIAN NAVY COLLEGE OF ACCOUNTS AND FINANCE PMB 9001 OWERRINTA, ABIA STATE

Study the GUIDELINES FOR ADMISSION INTO ACADEMIC PROGRAMMES carefully before completing this APPLICATION FORM. Scan the completed application form after affixing your recent passport photograph and send same to: nnflc@navy.mil.ng.

The underlisted items must be submitted during registration:

- 1. Original and photocopy of application form,
- 2. Four (4) Passport Photographs and
- 3. Two (2) clear copies of credentials

A. PERSONAL DATA



Passport Size Photograph of applicant must be attached here. Your name should be written at the back of the photograph

APPLICATION FORM FOR ADMISSION INTO THE HIGHER NATIONAL DIPLOMA PROGRAMME

1.	Name:			
	(Surname)	(First Name) , Police, NSCDC,FRSC, NCS, NI	(Ot	ther Names)
3.	Official Number:		4. Rank/Rate:	
5.	Unit/Formation Address:			
6.	Date of Birth:		. 7. Gender:	
8.	State of Origin:		. 9. LGA:	
10.	. Marital Status:		11. Phone Numbe	er:
12.	. Date of Commission/Enlistme	ent:		
13.	. E-mail Address:			
14.	. Name of Next-of-Kin:		. 15. Relationship:	
16.	. Address of Next-of-Kin:			
17.	. Phone Number of Next-of-Kir	n:		

RESTRICTED

QUALIFICATIONS OBTAINED e.g. WASC/SS pe: chool Address:		Туре:					
/pe:thool Address:		Туре:					
/pe:thool Address:		Туре:					
/pe:thool Address:		Туре:					
/pe:thool Address:		Туре:					
/pe:thool Address:		Туре:					
chool Address:		•					
		School Address:		Туре:			
		School Address:					
entre No:	•						
	.	Centre No:					
Examination No:		Examination No:					
		Year:					
ear:		Year:					
First Sitting Second	Sitting						
Subjects	irade	Subjects		Grad			
OTHER CERTIFICATES							
from		το					

RESTRICTED

G. INDUSTRIAL ATTACHMENT	
1. Date of commencement of unsupervised	d Industrial Training
2. Date of completion of unsupervised Ind	ustrial Training
H.COURSES AVAILABLE	
HND Accountancy	
HND Business Administration and Mana	agement
HND Office Technology and Manageme	ent
J. <u>DECLARATION</u>	
I,	
•	oplied in the Application Form is true to the best of mation if any is found to be false or untrue afterwards.
Signatureof Candidate	Date
*K.Recommendation by Commanding	Officer:
I certify that the candidate	is a
personnel serving under my Command Programme.	and I recommend him/her for admission to NNCAF HNI
Full Name in CapitalLetters:	
Rank:	Service No:
Signature	Date
* Only Commanding Officer's certification	n(s) will be accepted.
	<u>UNIT STAMP</u>
For Office Use Only:	
Admitted/Not Admitted	
Signature	 Date