



Flight Operation Officer's Course (Flight Dispatcher)

Affix Passport

PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THE APPLICATION FORM

- (1) Applications are to be completed in English by the applicants themselves.
- (2) Use black ink only. Please follow the notes carefully and complete all questions as indicated.
- (3) Application form not properly or fully completed will not be processed further.
- (4) The following documents are to be provided with the application.
 - (a) A true copy of school certificate or its equivalent attested by the appropriate authorities.
 - (b) A photocopy of the applicant's valid international passport, National ID Card or any other acceptable means of identification
 - (c) Four recent, colored, passport-sized photographs.
- (5) Submitting an application does not in any way mean that an applicant is admitted into International Aviation College (IAC).
- (6) Qualified applicants will be notified in writing after completing the short listing procedure, and an official evaluation of their credentials
Short listed applicants will undergo Aptitude tests, on the college campus.
- (7) Admission is only valid for the enrollment batch for which the Student applies.
- (8) All documents submitted in support of an application become the property of the College.
- (9) Fully completed form should be submitted in our college campus office, Ilorin or send vial our email address.(info@iac.com.ng).
- (10)The Application Fee is non refundable.



GENERAL INFORMATION

(1) Date Day Month Year

(2) Given Name(s)

(3) Family Name (as shown in your identification)

(4) Other Name (including any other names you are known by and/or any other names that you have been known by)

(Put a cross (x) in the relevant box) (5) Age (6) Sex Male Female

(7) Marital Status Single Married/Civil Partner Unmarried/Partner Divorced/Dissolved Partnership Separated Widowed

(8) Date of Birth (9) Place of Birth

(10) State of Origin (11) Country

(12) International Student (indicate home country)

(13) Others (please describe)

(14) Children Yes No

(15) Permanent Address

(17) Home Phone May we leave a message at this number? Yes No

(18) Cell Phone May we leave a message at this number? Yes No

(19) E-Mail Address

RACE Put a cross (x) in the relevant box

(20) African Asian Arabian Caucasian Indian

Others (please describe)

EMERGENCY CONTACT

(21) Name Next of Kin

Address of Next of Kin

Telephone

Email address



FAMILY INFORMATION

(Please indicate information on your immediate family)

(22)	Name of Parents	Occupation	Marital Status	Age	Telephone
1.					
2.					

(23)	Name of Siblings	Occupation	Marital Status	Age	Telephone
1.					
2.					
3.					

ACADEMIC INFORMATION

(24) Secondary Education

(Please provide details of all education that you have successfully completed or part-completed.)

Title of Course	Name of Institution / School	Years (from/to)	Completed	Results
1.				
2.				
3.				

FINANCE

(27) How Do You Plan To Finance Your Education?

Self Sponsor Parent/Guardian Company Sponsor Government Sponsor Others

Details of Others

REFERENCE: (Referees should not be family members) please identify 2 persons who can provide information on your character, and confirm the information you have provided.

34. Family Name

Family Name

First Name

First Name

Address

Address

Telephone number

Telephone number

Email Address

Email Address

DECLARATION *(to be signed by the applicant)*

- (1) I accept that if, completing this application, I knowingly or carelessly provided untrue or incomplete information;
 - (a) Any offer of admission, whether accepted or not, may be withdrawn by International Aviation College;
 - (b) I may be required to withdraw from any course in which I am enrolled.
- (2) I agree that International Aviation College may verify the information provided by contacting the relevant institution or any secondary or post-secondary institutions listed above.
- (3) I confirm that all the information provided in this application is correct.
- (4) I have read the section concerning cancellation, withdrawal and refunds and declare that I understand and accept the terms and conditions therein. I agree that if the College accepts my application I will commence the course of training and make payments according to the payment schedule.
- (5) I hereby give the College permission to pass my relevant information concerning any results and progress at the College to my sponsor

Signature of Applicant

Date

Signature of Parent, legal guardian or sponsor (if Applicable)

Date