NATIONAL INSTITUTE FOR HOSPITALITY AND TOURISM (NIHOTOUR)
Central Administration
P.M.B 543 GARKI, ABUJA, NIGERIA
www.nihotour.gov.ng

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APP FORM NO: NIH…….. (TO BE COMPLETED IN DUPLICATE)

APPLICATION FOR ADMISSION INTO CERTIFICATE PROGRAMMES

SESSION ……
CAMPUS/SCHOOL CHOICE……..

INSTRUCTURES

(i) The first step towards a successful application is proper completion of the application form in all its essentials. Read the forms over carefully and them and return complete forms to the ACADEMIC SECRETARY, NATIONAL INSTITUTE FOR HOSPITALITY AND TOURISM, P.M.B. 543 GARKI, ABUJA, NIGERIA.

(ii) Do not sent original certificates or statement of result but ensure in your own interest that all information given in respect of every section of the form is correct.

1. PROGRAMME IN VIEW……
……

2. PERSONAL PARTICULARS

First Name ……Middle Name …….. Surname:……..
Date of Birth…… Sex …….. Marital Status……..
Home Town …….. Local Govt. Area……..
State of Origin…… Nationality……..
Permanent Home Address……..
Contact Address/E-mail ……..
…….. Tel/GSM No ……..
E-mail Address ……
Name and Address of Parent or Guardian or Next of Kin ……
……..
Tel No …….. E-mail ……..

3. NAME AND ADDRESS (TOWN & STATE) OF SECONDARY SCHOOLS COLLEGES ATTENDED

S/NO	SCHOOL/COLLEGE ATTENDED	FROM	TO

4. EXAMINATION REPORT

Please ensure that you list the subjects and the grade scored in each as recorded in the certificate or Result Slip and quote correctly the Date, Centre and Examination Number.

EXAM. NAME AND DATE ……. CENTRE NO _____ EXAM NO _____		EXAM. NAME AND DATE ……. CENTRE NO _____ EXAM NO _____		EXAM. NAME AND DATE ……. CENTRE NO _____ EXAM NO _____
SUBJECT TAKEN	GRADE	SUBJECT TAKEN	GRADE	SUBJECT TAKEN

5. Have you ever entered any institution for post SSCE/GCE 'O' level study? YES/NO If Yes give its name and date(s) below.

Names of Examination	**Date of Examination**	**Subject Taken**	**Grades of Mark**

6. PREVIOUS UNIVERSITY OR INSTITUTION ATTENDED

a. Have you ever been to this or any other Institution before?

b. If so, state:

(i) Which University …….

(ii) Reason(s) for leaving …….

(iii) Date of leaving …….

7. CAUTION:

You are advised to note that:

(i) Every section, paragraph or sub-paragraph of this forms should be completed

(ii) If you are not sure of your grades of Passes, please find out

(iii) In any communication about this application (Whether by writing, telephone, personal call by yourself for through somebody else) the application number and the course you applied should be stated.

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(iv) The provision of any false, or incorrect information or failure to provide necessary information, may lead to the complete rejection of this application.

8. DECLARATION

I hereby declare that I wish to enter NIHOTOUR, that the particulars given on this form are to the best of my knowledge correct and that if admitted to the Institute. I shall regard myself bound by the Ordinances, Statues and Regulations of the Institute and that if at any time the Institute is reasonably satisfied that any of the information I have given on this form is false or incomplete, I will be required to withdraw from the Institute or be liable to prosecution or both.

…… ……

Signature Date

FOR OFFICE USE ONLY

		Remark	Signature of Office making Entry	Date
(a)	Date of Receipt			
(b)	Receipt No. for Application fee			
(c)	Result communicated			
(d)	Admission Status			

FORM NO: HTI…….

(TO BE COMPLETED IN DUPLICATE)

CONFIDENTIAL REPORT FORM

APPLICATION FOR ADMISSION INTO CERTIFICATE PROGRAMMES

SESSION ……..

First Name ……Middle Name …….. Surname:……...

Date of Birth…… Sex …….. Marital Status…….……...

Home Town ……..…… Local Govt. Area…….....

State of Origin…….…… Nationality…….....

Course Applied For

(TO BE COMPLETED BY PRINCIPAL OF THE APPLICANT'S PRESENT SCHOOL OR EMPLOYER).
How long have you known the applicant and in what capacity?

……

……

Please state his/her academic qualifications indicating all subjects and the grades scored in each.

S/NO	SUBJECT	GRADES	S/NO	SUBJECT	GRADES

Students Discipline: Has the student ever been dismissed, restricted, suspended or warned? If so, state nature of offence and date.

……

……

DECLARATION

I declare that the information given above is, to the best of my knowledge, correct

OFFICE STAMP
DATE:……

Name:……
Signature:……
Title:……
Address:……
……

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Central Administration
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Programme ……..

Name: ……
Address: ……
……
……

Dear Sir/Ma,

ACKNOWLEDGMENT OF
APPLICATION FOR ADMISSION

IN …….. ACADEMIC SESSION

1. Your application for admission has been received and is presently receiving attention

2. You should inform the Academic Secretary if your address changes before the beginning of the session

3. You should quote the above Application Number in any Communication about your Application.

4. The receipt (No ……..) of your Application form is enclosed herewith.

Yours faithfully,