



# Bezalee Educational Consults

Nigeria's Top Notch Consulting Firm

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PLEASE FILL THIS FORM WITH ADOBE ACROBAT ONLY

## Work Abroad Form

### APPLICATION FORM TO WORK ABROAD

This form should be completed and returned with certified copies of certificates, diplomas and other documents in support of qualification claimed by the applicant.

DATE OF REGISTRATION

TITLE:

### PERSONAL INFORMATION

First Name :

Middle Name :

Last Name :

Maiden Name, if applicable:

If married, Spouse's full name:

Date of Birth :

Gender :

Male

Female

Place Of Birth :

Nationality :

State of Origin :

Local Govt:

Marital Status :

Phone :

Email :

Home Address :

City :

State :

Do you have dependents?:

How many ?

Name of Dependents	Phone No	Email Address	Full Address of Dependents

Father's Name:

Father's Address:

Father's Email:  Father's Phone No:

Mother's Name:

Mother's Address:

Mother's Email:  Mother's Phone No:

Name of Next of Kin:

Address of Next of Kin:

Next of Kin's Email:  Next of Kin's Phone No:

## EDUCATIONAL BACKGROUND

List all Schools and Institution attended in the past or attending currently.

Name of School/Institution	City & State	Year Started	Year Graduated	Degree/Certificate Obtained
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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## EMPLOYMENT HISTORY

List of employments in the past five (5) years starting with current employment.

Are you currently employed?  Yes  No Type of Employment:

Employer's Name:

Employer's Address:

Employer's Email:  Employer's Phone No:

Job Title:  Monthly Income:

Briefly describe your duties:

(Answer this only if unemployed).

Were you previously employed?  Yes  No Type of Employment:

Name of Previous Employer:

Address of Previous Employer:

Previous Employer's Email:  Phone No:

Job Title:  Monthly Income:

Briefly describe your duties:

How long have you unemployed?:

Net worth:

## VISA(S)/TRAVEL INFORMATION

Do you have or hold any other Nationality other than previously mentioned?  Yes  No

If yes, state the country you have Nationality with:  If more, how many more:

Home Address of Country indicated above:

City :

State :

Email:

Phone No:

Passport/Travel Document Number:

Issuing Country:

City & State:

Iss. Date:

Exp. Date:

Have you ever LOST A PASSPORT or had one STOLEN?

Yes  No

Have you ever been granted a Visa?

Yes  No

If Yes, what Country?  Purpose:

Have you ever been denied a Visa?  Yes  No

If Yes, what Country?

Reason for denial:

What Country(ies) have you been to?

Intended Travel Destination:

Reason for Travel:

Intended Date of Travel:

Budget/Available funds for Travel:

Do you have a friend/relative at your intended country of travel or you would require accommodation?

I have someone over there

I would require accommodation

Answer if 'A' (I have someone over there)

Contact's Full Name:

Contact's Address:

Contact's Email:

Contact's Phone No:

Relationship:

Do you have his/her permission?  Yes  No

*Please make sure to return this document with scanned copies of the original of your documents. It should include originals of your school certificates as well as travel information.*

## AKNOWLEDGEMENT

I

solely acknowledge that i am the owner of the information given above and it is very much verifiable and true to my knowledge and can as well be used in the processing of my admission status.

**Signature**  
(Please sign directly  
inside the box)

Date:

Referral code: