Plot 10 Otunba Jobi Fele Way, Alausa, Ikeja, Lagos. Tel: 01 - 7744600, 4811091. e-mail: ncs@ncs.org.ng

UF	PGRADE APPLIC	CATION	FORM					
	Acknowledgement No.							
	DATE OF PURCHA	ASE						
PURCHASE RECEIPT	NUMBER	DAY						
SURNAME:	TI	ΓLE:						
OTHER NAMES:								
DATE OF BIRTH:	MARITAL	STATUS		SEX:				
NATIONALITY	STAT	E OF ORIG	SIN:					
CURRENT POSITION	ON	EMPLOYER						
OFFICE ADDRESS:								
PHONE NO:			FAX					
HOME ADDRESS:								
PHONE NO:			FAX					
E-MAIL								
N.C.S MEMBERSHIP NO		CUR	RENT GRADE:					
GRADE APPLYING FOR								
REASON FOR APPLYING FOR UPGRA	DE							
ACADEMIC INFORMAT	ION							
S/N INSTITUTION	(S) QUA	LIFICATI	ON(S)	DATE GRADUATED				

	DATE		SIONAL E					
S/N	DATE	POSITION	ORG	ORGANISATION			DUTIES	
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2								
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N	NAME POS		OSITION/CATEGORY Y		YEAR JOINED		NUMBER	
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NAM	E(PRINT)		ľ	MEMBER: N	SHIP O.	SIGNATU	RE DAT	
\PPL	.ICANT'S:							
	NAME		SIGN			DATE	REG. NO.	

Applicants should pay the sum of two **thousand Naira** as processing fee in favour of the **Nigeria Computer Society** (NCS). Payment should be made by **Bank Draft payable to Nigeria Computer Society or** direct payment into any of the following bank account: **First Bank of Nigeria Plc Shomolu Branch, Account No. 3182030000088, United Bank for Africa Plc, Lagos Central Branch, Account No. 01600030003454 or Skye Bank Plc Account No. 101-1770005168 and send copy of the Bank Teller to the National Secretariat for issuance of official receipt.**

Payments can be made through any branch of the Banks that is online. Completed Application forms should be returned to the National Secretariat of NCS with the under listed items.

- (a) Photocopies of applicant credentials
- (b) Photocopies of NYSC discharge certificate or exemption certificate
- (c) Two recent passport photographs of the applicant
- (d) 3 self addressed envelopes with appropriate stamps.
- (e) Photocopy of receipt issued on purchase of the form or deposit teller
- (f) Marriage Certificate (for married women)
- (g) Curriculum Vitae

FOR OFFICIAL USE ONLY

Registration No	Fionancial Position						
Chapter Participation:							
Conference Participation:							
Executive Secretary's Comment:							
Present Membership Grade							
Wishing to be Upgraded to							
Recommended for							
Recommended by:							
Name	Sign.	Date					
President's Approval:Name	 Sign.	 Date					
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