Passport Photo

Advanced Diploma in Forensic Accounting and Fraud Investigation\ IICFIP Certification

FAFI REGISTRATION APPLICATION FORM (FAFI # 2018)

Saturday Classes Only: 9am - 5pm, @ Niger Delta University, Wilberforce Island, Bayelsa State, Nigeria

INSTRUCTIONS FOR APPLICATION PROCESSING: Download the Application Form, print it out, complete/fill the printed copy, scan it and send it to these email addresses . fafiregistration2017@unitedcrmc.com or micky.berezi@ndu.edu.ng on or before 30th January, 2018.

Dr.( ) Mr. ( ) Mrs. ( ) Ms. ( ) Chief ( ) Other:

Name: _____ _____ M ( ) F ( )
Last First Middle

Home Address: _____

Office Address: _____

Telephone #_____ email_____

Position: _____ Occupation:: _____ Date:_____

Emergency Contact: _____ Relationship:_____ Tel. #_____

Please, kindly tick your educational qualifications as provided below:

( ) WASC/GCE/SSCE ( ) Certificate Program ( ) ND/OND ( ) NCE ( ) HND ( ) BSc/BA/BEd
( ) PGDE ( ) MSc/MA/MEd ( ) PhD ( ) Others

( ) If you are a student, provide your Course of Study and Institution: _____

Your successful completion of the **Advance Diploma FAFI Programme of Niger Delta University** entitles you to become a **Certified Forensic Investigation Professional "CFIP" of IICFIP, USA** and a holder of the **Certificate of Professional Proficiency "CPP" of UPTA, USA** after payment of the required discounted fees for both **IICFIP Membership and IICFIP Certification.**

This application requires a non-refundable Application Fee of N7,000 payable to the following Niger Delta University Account in DIAMOND BANK Plc: Name of Account: NDU-DIR CONSULT ENTREP RSRCH AND DEV -Account Number: 00164-05995 The payment Receipt or Teller should be scanned and forwarded to these email addresses - fafiregistration2017@unitedcrmc.com or micky.berezi@ndu.edu.ng on or before 30th January , 2018.

I hereby acknowledge that submission of this application is not a guarantee of an admission to the FAFI Programme . The University and Alliances of the programme reserves the right to either accept or disallow applicants based on insufficient educational qualification, lack of experience, falsification of credentials and other factors through the vetting process. However, if I am granted the privilege of this admission, I am legally responsible for the conditions required for the successful completion of the nine months programme and I consented to pay the semester tuition fee not later than a week to the beginning of the first day of class, and all future discounted fees for IICFIP Members and Certification payable only to: United Compliance & Risk Management Consult Limited via Ecobank (details only available to participants)

Do you agree to this conditions? Yes ( ) or No ( ) Are you corporate sponsored? NO ( ) Yes ( ), IF yes provide Company\Agency Name:_____ How do you hear about is Programme_____

Prospective Student's Signature: _____Date:_____

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY

Confirmed: ( ) YES ( ) NO Amount Paid: _____
Verification Agent: _____**Type of Payment:**_____
APPROVED BY_____ **DATE:** _____
Remark:_____

Chief Technical Programme Director\Facilitator: Dr. Mannixs Paul, MPA, FCFIP, FCIML , USA (IICFIP, North America)
NDU Campus FAFI Programme Administrator: Dr. Guagha Micky Berezi, PhD, FCIA, FCPA

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