



## STUDENT REGISTRATION FORM

### PERSONAL INFORMATION:

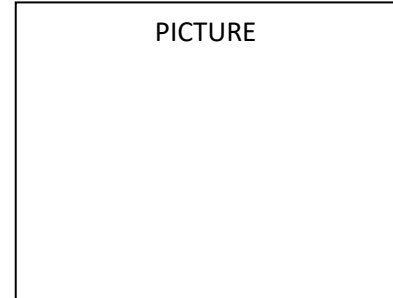
First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date of Birth: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

Male  Female  Status: \_\_\_\_\_



### CONTACT DETAILS

Kindly make sure you fill the contact details correctly. Every notifications will be sent to the contact below

Email address: \_\_\_\_\_

Mobile phone: \_\_\_\_\_ mobile phone 2: \_\_\_\_\_

Permanent address and city: \_\_\_\_\_

### MEDICAL INFORMATION:

Does the student have any existing medical or physical conditions that may affect his/her attendance at school? Yes  no  If yes, please give a brief description:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

If parent cannot be contacted during the day, contact this person:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship with student: \_\_\_\_\_ Gender: Male  Female

Cell number: \_\_\_\_\_ / \_\_\_\_\_



## PROGRAMS

### SCHOOL OF BUSINESS

(HND, BSc, International certifications)

- Accounting
- Banking and Finance
- Marketing
- Insurance
- Transport and Logistics

### PROFESSIONAL SCHOOL

(HND and BSc)

- Accounting
- Banking and Finance
- Marketing
- Insurance
- Management
- Human Resource Management
- Port and Shipping Management
- Transport and Logistics
- International Trade

## ENTRY REQUIREMENT

- Birth certificate
- Ordinary level certificate
- Advanced level certificate
- 4 X 4-passport size photo with red background

## FEES STRUCTURE

School	Year	Registration	1st Installment	2nd Installment	3rd Installment	Total
<b>The School of Business</b>	Year 1	50 000	300 000	150 000	150 000	650 000
	Year 2	50 000	300 000	150 000	150 000	650 000
	Year 3	50 000	400 000	200 000	200 000	850 000
	Year 4	50 000	400 000	200 000	200 000	850 000

School	Year	Registration	1st Installment	2nd Installment	3rd Installment	Total
<b>The Professional School</b>	Year 1	50 000	200 000	100 000	100 000	450 000
	Year 2	50 000	200 000	100 000	100 000	450 000
	Year 3	50 000	250 000	125 000	125 000	550 000

## Contact US

698081602 / 677732082

[contact@sbhibs.org](mailto:contact@sbhibs.org)

[www.sbhibs.org](http://www.sbhibs.org)

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**PAYMENT DETAILS**

Kindly note that payment once made is non-refundable and non-transferable.

**Reason for payment**

Registration

2<sup>nd</sup> Installment

1<sup>st</sup> Installment

3<sup>rd</sup> Installment

Student Name: \_\_\_\_\_

Amount Paid (figures): \_\_\_\_\_

Amount Paid (word): \_\_\_\_\_

Payment Date: \_\_\_\_\_

**PAYMENT METHOD:**

**CASH Deposit**

**Bank Deposit**

**Bank Account Details:**

**ACCOUNT NUMBER:**

0	0	2	5	0	4	9	3	4	0	1
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**ACCOUNT NAME:**

ACN & Co TRAINERS COMPANY LIMITED
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**BANK NAME:**

CCA BANK
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\_\_\_\_\_  
**Finance and Admin signature**

\_\_\_\_\_  
**Student signature**

**Contact US**

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