

QUESTIONNAIRE ON PRE-TRAINING

Please tick (v) the appropriate answer to the following questions

S/N	MY KNOWLEDGE OF:	NONE	FAIR	GOOD	EXCELLENT
1	USE OF COMPUTER				
2	MICROSOFT WINDOWS				
3	MICROSOFT WORD				
4	MICROSOFT EXCEL				
5	MICROSOFT POWERPOINT				
6	MICROSOFT ACCESS				
7	INTERNET/INTRANET				

APPLICATION PROCESSING FEES:

Applicants should pay the sum of N5,000.00 five thousand Naira) as processing fee in favour of the Computer Forensics Institute Nigeria (CFIN).

Payment should be made by or direct payment into the following bank account:

Account Name: **Computer Forensics Institute Nigeria (CFIN)**
 Bank/Branch **Intercontinental Bank Plc, Iju Branch**
 Current Account No.: **0239-11800-0000045**
 Depositors name: **This equals the Applicant's name; and**
 Depositor's Phone No: **Applicant's Phone number**

and send copy of the bank teller to the National Secretariat or send an email containing the bank teller information to membership@cfinonline.org for issuance of official receipt.

DOCUMENTS TO ATTACH TO APPLICATION FORM:

Completed application forms should be returned to the National Secretariat of CFIN with the following:

- (a) Curriculum Vitae
- (b) Two recent passport photographs of the applicant
- (c) Photocopies of applicant's credentials
- (d) Photocopy of NYSC discharge certificate or exemption certificate (if applicable)
- (e) 3 self addressed envelopes with appropriate stamps (not required if you are using email)
- (f) Photocopy of receipt issued for purchase of the application form or that of bank teller.
- (g) Two letters of reference from responsible citizens who can attest to your integrity and character.

Note: b, c & d are to be endorsed by CFIN chartered members who are recommending or sponsoring the candidate. Where there is no chartered member in your area, please contact the National Secretariat on 01-775-5707 or CFIN office nearest to you for advice.

FOR OFFICIAL USE ONLY

Date Received	<input type="text"/>	Date acknowledgment sent	<input type="text"/>
Exam Diet:	<input type="text"/>	Result:	<input type="text"/>
Exam/Diet:	<input type="text"/>	Result:	<input type="text"/>
Membership Cadre	<input type="text"/>	Date Admitted	<input type="text"/>
Recommended by..... Name			
Signature.....		Date.....	
Approved by			
Signature.....		Date.....	
Membership Number Allocated: <input style="width: 100%;" type="text"/>			