


**AWOVARSIY COOPERATIVE INVESTMENT AND CREDIT SOCIETY LIMITED
OBAFEMI AWOLOWO UNIVERSITY, ILE-IFE, NIGERIA**

BANKERS: Skye Bank Plc, OAU Branch OAU Microfinance Bank, Ltd. Access Bank Plc, OAU Branch		Date <table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 25%;"> </td> <td style="width: 25%;"> </td> <td style="width: 25%;"> </td> <td style="width: 25%;"> </td> </tr> </table> Day Month Year				

MEMBERSHIP FORM

A. PERSONAL INFORMATION

1. Full Names (Surname Last) _____
2. Date of Birth: _____
3. Marital Status: _____
4. Nationality: _____
5. House Address: _____

6. Staff Information:
 - i. Faculty: _____
 - ii. Department: _____
 - iii. Year of Employment: _____
 - iv. Year of Confirmation of Employment: _____
 - v. Status/Position: (GA/AL/LII/LI/SL/READER/PROF): _____
 - vi. Staff Code Number: _____
 - vii. Email: _____ / _____
 - viii. Phone Numbers: _____ / _____
 - ix. Telegram Number _____
 - x. WhatsApp Number: _____
7. Next of Kin:
 - i. Name: _____
 - ii. Relationship: _____
 - iii. Address: _____
 - iv. Phone: _____

B. CONTRIBUTIONS

1. Entrance Fee: _____ 1,000.00
- Monthly**
1. Development Levy _____ 200.00
 2. Share: (Person Determined) (Minimum: ~~₦~~100,000.00)(Payable over First 12 months) _____
 3. Savings (Person Determined) (Minimum: ~~₦~~2,500.00) _____
- Total Monthly Contribution* _____

C. CERTIFICATION

I hereby, certify that the information provided in this form is true and correct

Signature.....

Date:.....