



ADMISSION REQUEST FORM

~ VTN STUDY ABROAD ~

VISION TRENDS NETWORK (VTN)

Plot 90, Adetokunbo Ademola Crescent, Wuse II, P.O. Box 298 Old Karu, Abuja 900110

Phone: 080 571 571 33. E-mail: vtnafrica@gmail.com

Website: www.vtnstudyabroad.com



FORM NO: _____



1. APPLICANT'S PERSONAL INFORMATION

Name: _____
(surname) *(other names)*

Date of Birth: _____ Place of Birth: _____
(dd/mm/yyyy)

State of Origin: _____ Nationality: _____

Sex: _____ Marital Status: _____ Religion: _____

Residential Address: _____

E-mail: _____ Tel: _____

2. SCHOOLS ATTENDED / DATE

- a. _____, _____
- b. _____, _____
- c. _____, _____
- d. _____, _____

3. PROGRAM INTENDED (TICK AS APPROPRIATE)

Undergraduate

Graduate

Doctorate

Program of Choice: _____ Country of Choice: _____

School of Choice / City (if any): _____

Test Scores / Date (not applicable to all schools)

ACT _____ SAT _____ GRE/GMAT _____

TOEFL _____ IELTS _____

4. SPONSOR'S INFORMATION

Name (title): _____

(surname)

(other names)

Contact Address: _____

E-mail: _____ Tel: _____

Occupation: _____ Relationship with student: _____

*NOTE: Sponsor's bank statement showing minimum of **\$10,000USD** or equivalent will be required for student's visa processing.*

5. PASSPORT INFORMATION

Passport Number: _____ Expiry Date: _____

6. TERMS/CONDITIONS OF SERVICE

a. This form should be completed, signed and returned with a non-refundable registration fee of N5,000 only.

Account Name: **VISION TRENDS NETWORK**

Account Numbers: **0198466308 – (Naira)**

0201114875 – (Dollar)

Banker: **Guaranty Trust Bank**

b. This form should be returned with the following documents: International Passport (photo page), the student's credentials, medical fitness certificate and two (2) recent passport photographs.

c. A **SERVICE FEE** is only applied to institutions not on our associate partners list.

7. APPLICANT'S DECLARATION

I, _____ declare that the information contained on this form is true, correct and complete. VISION TRENDS NETWORK has my permission to verify this information and request additional documentation as needed. I have also agreed to the terms/conditions of service as stated above.

Applicant's Signature

Date