

Management Suite
 Intercontinental Plaza,
 Zone 3, Wuse, Abuja.
 Nigeria.
 Tel: +234 (0) 8099298495
 Email: info@lsdcltd.com
<http://www.lsdcltd.com>
 RC: 944443



LSDC LANGUAGE SCHOOL REGISTRATION FORM

Date:

Insert passport
photo here

Preferred mode of lesson: (Tick one) Online Face-to-Face

Kindly state briefly your reason/ motivation for enrolling for this course and what you hope to achieve:

Language to study:

Student Name:

Sex:

Age (optional):

Telephone number:

E-mail address:

Country of origin:

Country of residence:

Occupation:

Office address:

Residential address (optional):

Length of stay in country of residence:

Signature:

Language(s) spoken:

Date.....

Do you speak the language (tick): YES NO

Are you familiar with the alphabet: YES NO

Kindly indicate your language skill level below:

	Beginner	Elementary	Intermediate	Advanced
Reading				
Writing				
Speaking				
Listening				

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LSDC DOMESTIC STAFF SERVICES CLIENT REGISTRATION FORM

Date:

What category of staff do you seek?

1. Driver
2. Extramural tutor
3. Housekeeper
4. Gardener

Place
passport
here.

Client Name:

Note: We do not engage in child trafficking/labour: All our staff are above the age of 18.

Sex:

Do you have any special request/ observation/ question?

Age (optional):

Telephone number:

.....

E-mail address:

.....

Country of origin:

.....

Country of residence:

.....

Occupation:

.....

Office address:

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Residential address:

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Client Signature:

Date.....

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LSDC DOMESTIC STAFF SERVICES STAFF REGISTRATION FORM

What category of staff do you fall under?

- | | |
|---------------------|----------------|
| 1. Driver | 3. Housekeeper |
| 2. Extramural tutor | 4. Gardener |

Place passport photo here.

IMPORTANT NOTICE:

- You MUST be above 18 years old
- You MUST supply two (2) referees/ guarantors who MUST supply means of identification and one passport photograph.

Name/ Sex/ Date of birth/ Age: / M or F:/ Date of birth:/ Age:

Telephone number/ Email address:

Residential address:

Nationality (Country of origin)/Signature/ Date:/...../.....

FOR GUARANTORS ONLY

IMPORTANCE NOTE TO GUARANTORS:

PLEASE NOTE THAT BEING A GUARANTOR FOR THE ABOVE NAMED STAFF (STAFF NAME:) MEANS THAT YOU (YOUR NAME :.....) HEREBY UNDERTAKE TO BE LIABLE AND ANSWERABLE FOR ANY ACT OF OMISSION TO US (LSDC LTD); AND THAT YOU UNDERAKE TO INDEMNIFY US FOR ALL LOSSES OR DAMAGES INCURRED THROUGH ANY SUCH ACT OR OMISSION SHOULD THIS GUARANTEE TURN OUT TO BE FALSE. IT FURTHER MEANS THAT YOU UNDERTAKE TO BE LIABLE FOR ALL MISDEEDS/ MISDEMEANOUR OR ANY/OR NEGLIGENT ACTS OF THE SAID MR/MISS (STAFF NAME:). PLEASE DO NOT GUARANTEE ANYONE WHO IS NOT WELL KNOWN TO YOU. BE GUIDED.

1. Guarantor's name/ Sex:M or F:

Date of birth/ Age/ Nationality (Country of origin)://

Occupation: Telephone number:

Office address:

.....Residential address:

.....Signature/ Date:/.....

2. Guarantor's name/ Sex:M or F:

Date of birth/ Age/ Nationality (Country of origin)://

Occupation: Telephone number:

Office address:

.....Residential address:

.....Signature/ Date:/1