



**INSTITUTE FOR PEACE AND CONFLICT RESOLUTION (IPCR)  
BASIC CONFLICT MANAGEMENT COURSE (BCMC) 2017**

Course Date: 21<sup>st</sup> -25<sup>th</sup> August, 2017

**APPLICATION FORM**

**Personal Details**

1	Surname		3	Citizenship	
2	Other names		4	Date of Birth (dd/mm/year )	
5	Sex				
6	Place of Birth				
7	Mailing Address				
8	Residential address				
9	Name and address of Organization (if employed)				
10	Mobile No (Compulsory)				
11	E-mail (Compulsory)				
12	Emergency Contact				
12.1	Name				
12.2	Address				
12.3	Contact Numbers				

**Education**

13	Names of Institutions attended	Period of Studies (in Years)	Qualifications Obtained
13.1			
13.2			
13.3			
13.4			
13.5			

**Please outline your reasons for attending the course in not more than 300 characters.**

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**How did you get to know about the training? Specify** \_\_\_\_\_

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**Declaration of the Applicant**

I certify that the information provided in this application form is correct. I also agree with the following;

- ♦ I am willing to engage in all the activities of the BCMC programmes.
- ♦ I will abide by the stated rules and regulations of the programme.
- ♦ I agree that the programme does not allow for any additional commitments during the training sessions.

**Applicant's Signature:** ..... **Date:** .....

**Please attach:**

1. Curriculum vitae (including the name and contact details of two reference)
2. Recent photograph

Please e-mail your application and all supplementary documentation to: [training@ipcr.gov.ng](mailto:training@ipcr.gov.ng)

Copy: [awodola@ipcr.gov.ng](mailto:awodola@ipcr.gov.ng), [iwara@ipcr.gov.ng](mailto:iwara@ipcr.gov.ng)

**Deadline for Application: 24<sup>th</sup> August, 2017.**