**\* PLEASE READ THE FORM CAREFULLY BEFORE FILLING & SUBMITTING**

**SECTION 1 - COMPANY DETAILS**

Name of Company:

Company Registration No.:

Attach (*CAC certificate, Articles of Memoranda, Partnership Deed*): Upload

Number of Years in Existence:

Company Address:

Company Website:

Company Email Address:

Company Telephone No.:

Courses Offered (*paste link to the website page where ALL courses are listed*):

Proof of Training Track Record:

(***Please upload a one page document*** *with information on number of trainees/graduands per year, accreditations by industry institutes, awards of training excellence, alumni/achievements post-training, links* *online videos, etc.*):

Faculty Experience/Training:

Award(s) Won (*if any*):

Educational/Industry-related Affiliations:

Competitive Advantage (*if any*):

**SECTION 2 – DIRECTOR(S) DETAILS**

(Please list **AT LEAST ONE** partner if business structure is a Partnership)

Company Representative Details (DIRECTOR):

 Name:

 Address:

 Email:

Mobile:

Company Representative Details (Partner, if any):

 Name:

 Address:

 Email:

 Mobile

Company Representative Details (Partner, if any):

 Name:

 Address:

 Email:

Mobile:

**APPLYING DIRECTOR DETAILS ONLY**

Type of ID: (*Driver’s License, National ID, International Passport, Age Declaration* – Drop down menu)

ID No. :

ID Document: Upload

State of Origin (*where you come from*): (Drop down menu)

State of Residence (*state you currently live in*): (Drop down menu)

CV / Resume (*with updated employment history*): Upload

Years of Professional Experience:

Name of registered national or international Association/Guild to which you belong (if any):

Statement of Grant Purpose focusing on how the grant will be deployed and how this will increase and improve the value and affordability of training, the sustainability of the business and address the technical needs of the industry (*2 pages max*.)

**SECTION 3 - LIASION DETAILS – POINT OF CONTACT WITH PROJECT ACT-NOLLYWOOD** (Do **NOT** fill if same as applying Director)

Name: Position in Company:

 Address:

 Email: Mobile:

Type of ID: (Driver’s License, National ID, International Passport, Age Declaration – Drop down menu)

ID No. :

ID Document: Upload

State of Origin (*where you come from*): (Drop down menu)

State of Residence (*state you currently live in*): (Drop down menu)