



**UNIQUE EMPOWERMENT &
EMPLOYMENT INITIATIVE**
...pulling down the walls of poverty

SMALL SCALE SUPPORT PROJECT UNDER
 **WORLD BANK GROUP**
GUIDLINES

THIS PROJECT IS DESIGNED TO EMPOWER 2,500 SKILLED PERSONNELS IN EACH 774 LOCAL GOVERNMENT IN NIGERIA. PRODUCTION ACTIVITIES FROM THE FULL ACTUALIZATION OF THIS PROJECT WILL BRING ABOUT TOTAL ECONOMIC AND FINANCIAL FREEDOM TO OVER 5 MILLIONS NIGERIANS THEREBY BOOSTING THE GDP OF NIGERIA AND ECONOMY AT LARGE. NIGERIA HAVE THE CAPACITY TO CONSUME ALL THAT IT PRODUCE WITHIN AND LITTLE EXCESS EXPORTED TO NEIBOURING WEST AFRICA COUNTRY.

FINANCIAL AND TECHNICAL DONOR TO THIS PROJECT IS READILY AVAILABLE PRIVATE INVESTORS WILLING TO PARTNER WITH LOCAL SKILLED WORKER FOR THE PROVISION OF FUNDING, TRAINING AND EQUIPMENT FOR EFFECTIVE COLLABORATION.

GOOD LUCK!

SIGNED

Dr. Christopher Imumolen
President UNIC Foundation

ADD
PASSPORT
PHOTOGRAGH
HERE

THIS FORM IS FREE OF CHARGE

THE PROCESS IS FREE OF CHARGE

SUBMIT THIS FORM IN PERSON OR BY POST TO

UNIC FOUNDATION BUILDING ALONG LASU ISHERI ROAD

OLOWONLA BUS STOP IGANDO LAGOS

MONDAYS TO FRIDAYS 10AM- 2PM.

DEADLINE OF SUBMISSION: 12th December 2018



APPLICATION

ITEMS	DETAILS
FULL NAME	
HOME ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	
MARITAL STATUS WITH NO OF CHILDREN	
SEX, HEGHT AND COMPLEXION	
SPOUSE NAME & PHONE CONTACT	
EDUCATIONAL QUALIFICATION	
VOCATIONAL /SKILL/ PROFESSIONAL TRAINING	
DESCRIBE THE WORK SKILLS YOU POSSESS	
DESCRIBE THE TRADE YOU ARE INTO?	
HOW DO YOU PROCESS YOUR PRODUCT?	
HOW DO YOU MARKET THE OUTPUT FROM YOUR TRADE?	
HOW HAVE YOU BEEN SOURCING FOR FUND?	
HOW MUCH IS YOUR MONTHLY TURNOVER?	



<p>WHA IS THE NAME OF YOUR BUSINESS AND THE LOCATION?</p>	
<p>WHAT IS YOUR BIGGEST BUSINESS SUCCESS?</p>	
<p>LIST YOUR CURRENT PARTNERS?</p>	
<p>IS YOUR COMPANY REGISTERED? IF YES WHAT IS KIND OF REGISTRATION?</p>	
<p>EXPALIN YOUR BUSINESS STRUTURE?</p>	
<p>HOW LONG HAVE YOU BEEN INTO BUSINESS OF YOUR TRADE?</p>	
<p>WHAT IS YOUR BUSINESS BIGGEST CHALLENGES?</p>	
<p>WHAT EQUIPMENT DO YOU NEED THAT WILL HELP FOR BETTER WORK OUTPUT?</p>	
<p>WHAT OTHER INPUT WOULD YOU NEED IN YOUR BUSINESS TRADE?</p>	
<p>ARE YOU READY TO PARTNER WITH THIS PROGRAM FOR BUSINESS SUPPORT?</p>	



GIVE INFORMATION OF NOT LESS THAN TEN PERSONS THAT KNOWS YOU AND YOUR BUSINESS FOR CONFIRMATION. (ENSURE THIS CONTACT INFORMATION IS ACCURATE)

S/N	NAME	PHONE	RELATIONSHIP

I..... hereby confirm that all the information I have supplied above is correct and if found inaccurate my application should be declined.

Sign and Date:

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ONCE YOU ARE SELECTED YOU SHALL BE CALLED FOR AN INTERVIEW AND FINALLY SUPPORTED

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