

SAVVYPRENEUR GLOBAL TECH HUB LIMITED

**SHOP NO: C342 WORLDGATE SHOPPING CENTRE
KEFFI-ABUJA EXPRESSWAY
KORODUMA, ONE MAN VILLAGE MARARABA, KARU
NASARAWA STATE**

SKILLS ACQUISITION ON ENTREPRENEURSHIP REGISTRATION (FORM A)

This registration form is designed for individuals and organizations seeking to acquire skill from **SAVVYPRENEUR GLOBAL TECH HUB LIMITED**. All clients are required to provide accurate information and comply with the stated conditions before service engagement.

Surname: _____

Other Name(s): _____

Sex: _____

Date of Birth: _____

State of Origin: _____

Contact Address: _____

Phone Number: _____

Email Address: _____

Nature of Skill Required (please tick where applicable):

- a. Bar Soap ()
- b. Liquid Soap ()
- c. Air Freshener ()
- d. Vaseline Production ()
- e. Paint Production ()
- f. Tomatoes Pep Production ()
- g. Poultry Farming ()
- h. Fisheries ()
- i. Point of Sale (POS) ()
- j. Snailing ()

Cost of Training

- a. Bar Soap ₦.....
- b. Liquid Soap ₦.....
- c. Air Freshener ₦.....
- d. Vaseline Production ₦.....
- e. Paint Production ₦.....
- f. Tomatoes Pep Production ₦.....
- g. Poultry Farming ₦.....
- h. Fisheries ₦.....
- i. Point of Sale (POS) ₦.....
- j. Snailing ₦.....
- k. And many more ₦.....

Mode of Delivery

- a. Virtual ()
- b. Physical ()

Requirement

Register and fill our skills acquisition form

- a. Pay the fees into the company account and sent receipt to the Secretary
- b. Specify the mode of training

Processing Fee Paid: Yes () No ()

Amount Paid: ₦_____

Applicants are required to clearly indicate their area of interest by ticking one option above. Upon selection of a training, the client is expected to fill the relevant sections of the form as indicated below.

In addition, 70% of the total fees must be paid after registration. The mobilization fee for training - varies depending on the nature, scope, and complexity of the service required. Details of the applicable mobilization fee will be communicated to the client after initial assessment. I hereby confirm that the information provided above is correct and that I agree to abide by the terms and conditions governing the training as structured by **Savvypreneur Global Hub Limited**.

For Official Use Only

Amount Paid: ₦ _____

Receipt Number: _____

Handled By: _____

Signature / Date: _____

Client's Names/Signature

Operation Manager

Managing Director