

SAVVYPRENEUR GLOBAL TECH HUB LIMITED
SHOP NO: C342 WORLDGATE SHOPPING CENTRE
KEFFI-ABUJA EXPRESSWAY
KORODUMA, ONE MAN VILLAGE MARARABA, KARU
NASARAWA STATE

This form is designed for academic clients seeking research and academic consultancy services from **SAVVYPRENEUR GLOBAL TECH HUB LIMITED**. Clients are requested to carefully fill in all required information and tick the appropriate options where applicable.

Surname: _____

Other Name(s): _____

Sex: _____

Place of Work / Institution: _____

Contact Address: _____

Phone Number: _____

Email Address: _____

Nature of Service Required (Academic Write-Up – please tick as applicable): Nature of Write-Up:

- a. Chapter One to Five ()
- b. Proposal Only ()
- c. Research Instrument ()
- d. Data Analysis ()
- e. Review of work ()

Cost of the Work (agreed and filled):

- a. Project: ₦ _____
- b. Thesis: ₦ _____
- c. Dissertation: ₦ _____

Duration of the Work (please tick where applicable):

- a. Three (3) Months ()
- b. Six (6) Months ()
- c. One (1) Year ()
- d. None of the Above ()

Payment Schedule: Clients are to adhere strictly to the payment structure below:

- a. 10% payment for information gathering ()
- b. 80% payment as mobilization fee to commence the work ()
- c. 10% balance to be paid after completion and before final submission ()

Mode of Delivering the Work (soft copy):

- a. Email ()
- b. WhatsApp ()
- c. Other Means (please specify): ()

Mode of Information Gathering:

- a. Student to collect information/data ()
- b. Research Assistant to assist at a cost to be agreed upon ()

Questionnaire Administration:

- a. By Student ()
- b. By Company Research Assistant ()
- c. None of the Above ()

Data Analysis:

- a. To be analyzed by the Student ()
- b. To be analyzed by the Consultant ()

Types of Data Analysis:

- a. Regression ()
- b. STATA ()
- c. Eview ()
- d. Programming ()
- e. Nvivo Software Analysis ()
- f. Smartpls ()
- g. Descriptive Statistics ()

I hereby confirm that the information provided above is accurate and that I agree to the terms, conditions, payment structure, and service procedures of **SAVVYPRENEUR GLOBAL TECH HUB LIMITED**.

For Official Use Only

Service Approved: _____

Total Cost Agreed: ₦ _____

Mobilization Fee Paid: a. Yes () b. No ()

Receipt Number: _____

Handled By: _____

Client's Names/Signature

Operation Manager

Managing Director