



# ACADA-COOU (IGBARIAM) MULTIPURPOSE COOPERATIVE SOCIETY LIMITED

CHUKWUEMEKA ODUMEGWU OJUKWU UNIVERSITY (COOU),  
ANAMBRA STATE, NIGERIA

## MEMBERSHIP/ APPLICATION FORM

### 1. Personal Information

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Phone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

Gender: MALE  FEMALE

Date of Birth: \_\_\_\_\_

State of Origin: \_\_\_\_\_

Marital Status: SINGLE  MARRIED  DIVORCED  WIDOW(er)

Home Town: \_\_\_\_\_ L.G.A. of Origin: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Department: \_\_\_\_\_ Faculty: \_\_\_\_\_

Staff ID Number: \_\_\_\_\_

Bank and Salary Account Number: \_\_\_\_\_

AFFIX YOUR  
PASSPORT  
HERE

### 2. Next of Kin Information

Next of Kin Full Name: \_\_\_\_\_

Next of Kin Address: \_\_\_\_\_

Next of Kin Email Address: \_\_\_\_\_

Next of Kin Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR OFFICIAL USE

Admitted: \_\_\_\_\_ Not admitted: \_\_\_\_\_

Membership/File No: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_