



THE UNIVERSITY OF  
BUCKINGHAM

## 2023-2024 (SCHOOL OWNER) REGISTRATION

Filling in this form registers you for the University of Buckingham (UoB) International Diploma of Education (iDE) 2023-2024 session.

Please input your information correctly. False information automatically disqualifies your registration. All details collected in this form are protected and only used for the UoB iDE.

After filling in and submitting this form, kindly make your registration fee payment of ₦ 5,000 to the specified bank (*details at the end of the form*). Your payment validates your registration.

**Registration Starts: June 1, 2023.**

**Paper Submission Closes: Aug 25, 2023**

\* Indicates a required question (*Questions with an asterisk must be answered*)

\* **Email Address:** (*Must be a valid and functional email address*)

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\* **Confirm Email Address**

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### PERSONAL DETAILS

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\* **First Name**

**Middle Name**

\* **Last Name**

\* **Gender:**  Male  Female

\* **Date of Birth** (*dd/mm/year*): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\* **Phone Number:** \_\_\_\_\_

## SCHOOL DETAILS AND YOUR ROLE

\* **What is your current role in the school?**

School Owner

School Administrator

Head teacher

Other (*Specify*) \_\_\_\_\_

\* **Do you teach in a classroom?** (*We want to know if you have access to the classroom to teach and if you will be able to make use of the classroom for the duration of this course to implement what you have learnt and carry out practical assessments. Selecting "No" will mean you will not be eligible to join the course.*)

Yes

No

\* **If yes, how often do you teach in a classroom?**

Daily

Weekly

Occasionally

\* **What is the name of the school where you work or own?**

\_\_\_\_\_

\* **In which state is your school located?** \_\_\_\_\_

\* **In which Local Government Area is your school located?**

\_\_\_\_\_

\* **Which class levels do you teach?** (*tick all that apply*)

Nursery

Kindergarten

Primary

Junior Secondary

Senior Secondary

\* **How many years have you been actively teaching?** \_\_\_\_\_

**\* As a School Owner / Head Teacher, do you have teachers currently enrolling on the programme?**

Yes

No

**If yes, how many of your teachers are enrolling on the programme?**

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## DETAILS OF DOCUMENTS TO BE ATTACHED

**\* What is your highest academic qualification? (tick only one)**

High school

National Diploma

Higher National Diploma

Bachelor's Degree

Master's Degree

Post-Graduate Degree

Other (Specify) \_\_\_\_\_

**\* In what year did you obtain the above academic qualification? (mm/year)**

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**\* In what year did you gain employment in the school where you teach?**

(mm/year) \_\_\_\_\_

**\* You are required to attach the following documents to your application:**

1. A recent passport photograph.
2. A copy of your highest academic qualification.
3. A copy of your letter of employment or letter from the school where you are currently working clearly stating the capacity/role that you work in. (*Excluding school owners*)
4. Your statement which is an expression of why you want to be on the UoB iDE programme in not more than 500 words.
5. Proof of registration fee payment.

**\* Our course is practical and geared to helping you improve how you teach and what you do in the classroom. You will therefore be required to regularly practice in your own classroom the different things that you are learning. There are also 3 assessed practical activities that you will need to do in your classroom each term, which will be marked and form part of your final score for the course. Do you understand and agree to this?**

Yes

No

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**Thank you for registering with the University of Buckingham Teacher Training Programme for the new session of the International Diploma in Education starting in September.**

**Please proceed to pay the 5,000 Naira registration fee using your phone number as the payment reference. You are required to pay to:**

**Account Name: Fedtech Services**

**Account Number: 3490000771**

**Bank Name: EcoBank**

**In cases where payments were made by transfers:**

Date payment was made: \_\_\_\_\_

Account and bank name from which payment was made:

\_\_\_\_\_

**All electronically filled forms are to be submitted to this email address with copies of all required documents in the attachment:**

**[admissions@ubttp.com](mailto:admissions@ubttp.com)**

**To submit the manually filled forms (handwritten), kindly call the phone number below for details of submission:**

**[09038581262](tel:09038581262)**

**If you have any questions or concerns during registration, kindly contact us Mondays – Fridays, 9:00 AM – 5:00 PM:**

**WhatsApp | +2349038581262**

**Phone | +2349038581262**

**Email | [admissions@ubttp.com](mailto:admissions@ubttp.com)**