NATIONAL INSPECTORATE BOARD

Application Form

Personal Profile		
First Name		
Middle Name		
Last Name		
Date of Birth	DD / MM / YYYY	Sex: Male □ Female □
Contact No.		
Email		
Place of Residence		Region
Academic Qualif	fication	
Current Employment Status	☐ Employed	□ Unemployed □ Retired
Highest Academic Qualification		
Professional Qualification		
No. of Years Teaching	No. of Years Working (Other than Teaching)	
Place of Work		
		_
Highest Rank		
After completing this form, kindly attach your CV and mail to:		Or hand deliver at:
National Inspectorate Board PMB M18 Ministries Post Office		NIB Office Yooyi Loop, Roman Ridge Accra
Accra		Digital address: GA-089-1361