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**GENERATIONS TO COME  
NURSING AND CARE**

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## **EMPLOYMENT GUARANTEE FORM**

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Our employment process requires that a person seeking employment in our establishment should produce a credible, acceptable and responsible person as guarantor subject to employment confirmation. If you are willing to stand as a guarantor for the said applicant.  
Kindly complete this form

**PLEASE NOTE** that it is dangerous to stand as a guarantor for some whom you do not know. Guarantors are warned that any false declaration on this form will attract severe consequences which may include prosecution.

### **APPLICANT NAME**

Mr/Mrs/Miss \_\_\_\_\_ whom is being considered for employment has given your name as his/her guarantor, please confirm your willingness to guarantee him/her against any loss, absconds of applicant from his/her employment and any other offence.

Committed by applicant in the period of employment

### **LEVEL OF GUARANTOR ACCEPTABLE**

- Practicing professional {Accountant, lawyers, doctors, lecturers, bankers}
- Civil servant not lower than grade 8
- C.E.O's business owner with an identified company registration with the C.A.C.
- Uniform personnel e.g police, navy

N.B Any other level of guarantor in conflict with the above stated level is not acceptable.

### **GUARANTORS DETAILS**

Name _____ <i>Surname</i> <i>Other Names</i>	Name _____ <i>Surname</i> <i>Other Names</i>
Address _____ <i>Home</i>	Address _____ <i>Home</i>
Address _____ <i>Office</i>	Address _____ <i>Office</i>
Occupation _____	Occupation _____
Telephone No. _____	Telephone No. _____
Date _____	Date _____
Signature _____	Signature _____

Submit 2 passports for each Guarantor