

ACT REGISTRATION INFORMATION



(Hard or digital copy)

0024597505

First Name		Middle Name	Middle Name	
Surname		Phone Number	Phone Number	
Gender: Male	Female D	Date Of Birth :	D M M Y Y Y	
Applicants are expected to signup accounts at act.org before submitting this document.				
Email Address (act.org login) Pass		assword (act.org login)	sword (act.org login)	
Test takers are required to go to the test center with their Bluebook-installed laptops (or notebooks)				
Dates JUL 12, 25 SE	EP 06, 25 OCT 18, 25 DE	EC 13, 25 FEB 07, 25 AP	PR 11, 26 JUN 13, 26 JUL 11, 26	
Deadlines JUN 13, 25 AL	JG 08, 25 SEP 19, 25 NO	OV 14, 25 JAN 09, 26 MA	AR 13, 26 MAY 15, 26 JUN 12, 26	
Desired Test Date: Test Center Code				
1 - 4 Score Recipient Codes				
AGENT'S DETAILS (If you are an agent, kindly submit your details below)				
Name:				
Phone Number(s) Email Address				
CENTER NAMES AND CODES				
ABUJA OGUN IBADAN JOS KANO LAGOS				
PORT-HARCOURT UYO UYO				
For full list of centers and their addresses visit gieva.org/centernamesandcode				
Test Cost Payment information		rmation	Account details	
ACT (WITH WRITING) \$222.00	ACT (NO WRITING) \$197.00	GUARANTY TRUST BANK (GTB) ACCOUNT NAME: GIEVA	Dollar (\$) Account Number O024597512 NAIRA (N) ACCOUNT NUMBER	

Note: No refund from GIEVA after payment has been made. Admission Ticket & valid Int. Passports are Compulsory on test day.

(Global Int. Edu. Vol. Assoc.)

(Call a GIEVA agent for Naira rates!)

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