

**UNIVERSITY OF LAGOS
PENSION LIFE CERTIFICATE**

NAME.....PENSION NO. SNR.

ADDRESS.....PENSION NO. JNR.

GSM NO.....DATE RETIRED.....

(1) Please arrange for my pension to be paid into the credit of my account with:
NAME OF BANK

ADDRESS AND BRANCH OF BANK.....

.....

SIGNED BY ME THISDAY OF 20.....

SIGNATURE LAND PHONE

(2) I certify that Prof./Dr./Mr./Miss

Whose signature is shown above is alive and appears before me today.

SIGNATURE.....

FULL NAME.....

ADDRESS

DATE GSM/LAND PHONE

Note: (a) The certificate required in Section (2) above must be signed by either Justice of Peace, a Notary Public, a Doctor of Medicine or Bank Manager.

(b) The pensioner's serial number must always be shown on this form in the space provided.

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For: Bursar