REGISTARTION FORM

STUDENT PERSONAL INFORMATION DATA FORM

1. STUDENT PERSONAL DATA

Name of Student (Surname first): _____

Date of Birth:_____ Place of birth _____

Sex:_____ Age:_____

Parent Home Address (P.O box not accepted):

_____

State of origin:_____ L.G.A_____

Home town _____ Language spoke_____

Nationality: _____

Religion: _____

2. PARENTS DETAILS

Fathers Name:_____

Residential Address: _____

Highest level of education:_____

Occupation:_____ State of origin:_____

Religion: _____ phone contact:_____

Mothers Name: _____

Residential Address: _____

Highest of education:_____

Occupation:_____ State of Origin:_____

L.G.A:_____Home Town:_____

Religion:_____ Phone contact:_____