

KM. 8.5, AFE BABALOLA WAY, ADO-EKITI, EKITI STATE, NIGERIA. P.M.B 5454 ADO-EKITI.

PLEASI	E ENSURE THAT	ALL FIELDS A	RE COMPLETELY FILLED	•
1. I	Deposit slip No:			
3. I	Branch:			
4. I				
	Surname		iddleFirst	
9. 1	Local Government	area:		_
10. 3	Secondary School A	Attended with Da	ate:	
				_
11.A D	ETAILS OF O'LEV	EL RESULTS	11. B DETAILS OF	O'LEVEL RESULT
Examin	ation:		Examination:	
Year of Examination:			Year of Examination	:
Reg. Number: Subject (s) Grade			Reg. Number:	92
0 10	Subject (s) Grade			
Subject	(s)	Grade	Subject (s)	Grade

Reg. Number: Subject (s) Grade

Examination: Year of Examination: Reg. Number: Subject (s) Grade

12. UTM EXAMINATION DETAILS(COMPULSORY) UTME Login e-Facility Email: UTME Login e-Facility Password: Registration Number: Year of Examination: Subject(s) Score Use of English 2 3 4 Aggregate Note that the UTME e-Facility email and Password required are the details Candidates used to register for the UTM Examination. 13. Did you Choose ABUAD as your First Choice of Institution in the UTM Examination? Yes or No Choice Institution Course 1st Choice 2nd Choice 14. Degree Applied For: 15. Email Address: _____ Mobile No: _____ 16. Applicant's Signature/Date: **NEXT OF KIN** A. Name: B. Place of Work: C. Nature of Work: D. Relationship:____ E. Phone Number: F. Contact Address: G. Signature/Date:_____ FOR OFFICIAL USE ONLY

Name, Signatiure and Date

Check By	
Approved By	
Remarks	

NOTE: Attach photocopies of O'Level Results/JAMB Result/Birth Certificate and Receipts of purchase.

ANY FALSE DECLARATION RENDERS THIS FORM/ADMISSION INVALID.