Busarialao College

...educating to inspire

No. 13, Prince Bisi Oyedeji Crescent, Off, New Yidi Road, Ilroin - Nigeria.
Tel: +234 (0) 7069285276, 07069348404 Web: www.busarialaocollege.com.ng

APPLICATION FORM

Affix
Passport Sized
Photograph

PERSONAL INFORMATION

Applicant's Name:.....
Surname *First Name* *Other name*

Date of Birth:.....**Sex:**..... **Nationality:**.....
Non Nigerians

State of Origin:.....**Local Government Area:**.....

Home Address:.....

EDUCATIONAL BACKGROUND

last Primary School Attended:.....

Last Secondary School Attended:.....

Last Class Attended:..... **Post Held:**.....

Extracurricular Activities:.....

PARENT / GUARDIAN INFORMATION

Name (Mr./ Mrs. / Alh.): .....

Occupation:.....

Office Address: .....

Mobile Phone: ..... **E-mail Address:** .....

HEALTH STATUS

1. **Does he / she use glasses? Yes [ ] No [ ]**
2. **Does the applicant have any of the specified health complain?**

   Sickle Cell Anaemia [ ] Epilepsy [ ] Whooping cough [ ] Mental Illness [ ]

   Other Illness (please state.....)
3. **Has the applicant been immunized for the following?**

   Yellow Fever Yes [ ] No [ ] Mumps Yes [ ] No [ ] Cholera Yes [ ] No[ ]

   Measles Yes [ ] No [ ] Chickenpox Yes [ ] No [ ]
4. **Genotype [ ] Blood Group [ ]**

NB:

Attach the photocopies of the following documents on submission

Birth Certificate

Transcript / Last Report

Medical Report from government approved clinic / hospital

Two (2) Passport sized photographs

FOR OFFICIAL USE ONLY

Entrance Examination Average / Score (100%): .....

.....	.....	.....	.....	.....	.....
Subject	*Score*	*Subject*	*Score*	*Subject*	*Score*

Qualify for Admission Yes [ ] No [ ]

Admission Number: .....

Date Admitted: .....

Class Admitted to: .....

Admission Officer Signature: ..... **Date:**.....

Principal's Signature: ..... **Date:**.....

.....

Official Stamp