



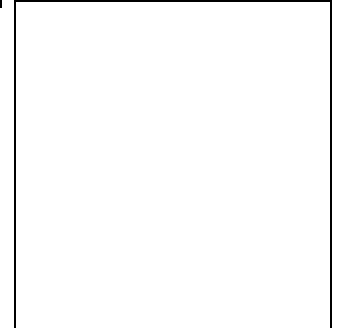
# AFE BABALOLA UNIVERSITY ADO-EKITI (ABUAD)

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

## **DIRECT ENTRY APPLICATION FORM**

**PLEASE ENSURE THAT ALL FIELDS ARE COMPLETELY FILLED**

1. Deposit slip No: \_\_\_\_\_
2. Bank Name: \_\_\_\_\_
3. Branch: \_\_\_\_\_
4. Name: \_\_\_\_\_  
SURNAME                      MIDDLE                      FIRST
5. Date of Birth: \_\_\_\_\_
6. Sex: \_\_\_\_\_
7. Nationality: \_\_\_\_\_
8. State of Origin: \_\_\_\_\_
9. Local Government Area: \_\_\_\_\_



### **10.A DETAILS OF O' Level RESULTS**

### **10.B DETAILS OF O' Level RESULTS**

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

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

### **11. JAMB DIRECT ENTRY DETAILS**

Direct Entry Login e-Facility Email	
Direct Entry Login e-Facility Password	
Direct Entry Registration Number	

**Note that the Direct Entry Login e-Facility email and password required are the details used by Candidates while registering on JAMB e-Facility Portal .**

12. Previous Higher Institution Attended with Date: \_\_\_\_\_  
\_\_\_\_\_

13. Qualification: \_\_\_\_\_
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: \_\_\_\_\_

**NOTE:** Attach photocopies of O'Level Results/A' Level Result/JAMB Direct Entry Slip/Birth Certificate and Receipts of purchase.

**FOR OFFICIAL USE ONLY**

**DEPARTMENT/COLLEGE:**

I support/do not support the candidate's admission

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Date Head of Department's Signature.

I support/do not support the candidate's admission

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Date Provost's Signature.

**REGISTRAR'S COMMENT(S)**

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Date Registrar's Signature.

**ANY FALSE DECLARATION RENDERS THIS FORM/ADMISSION INVALID.**