



UNDERGRADUATES STUDIES PRE-QUALIFICATION FORM



Surname: \

First Name \ Middle Name \

Preferred Name \

Date of Birth:

Day	Month	Year

 Citizenship \

Email Address \

Telephone \

Personal Information:

Contact Address \

Permanent Address \

Details of International Passport:

Passport Number \

Date of Issuance \ Expiry Date \

Details of Parent / Guidance

Surname, First & Middle Name \

Relationship \

Address \

Telephone Number \

Email \

Proposed Academic Program

Degree Applying for \

(Diploma, B.Sc., B.A., etc)

Program - First Choice \

Program - Second Choice \

Start Date (Jan. / Sept.) \

Educational Background

Name of Institution \

Address of Institution \

Start Date \

End Date \

Workstation: The Autograph, No.30 Sani Abacha Road, GRA, P.O. Box 5678, Port Harcourt, Rivers State, Nigeria.

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