

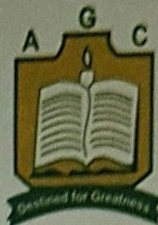


# DIOCESE OF LAGOS WEST EDUCATION BOARD ANGLICAN GIRL'S COLLEGE (FULLY BOARDING)

Km 25, Lagos Badagry Expressway, Ketu Ijanikin, Lagos.

Tel: 07086773594, 07034236768.

## STUDENT'S ADMISSION FORM



000109

Passport  
Photo

### SECTION A - PERSONAL DATA

1. Name: \_\_\_\_\_  
(Surname | Please write in Block Letter | Other Names)
2. Date of Birth: \_\_\_\_\_ 3. Age \_\_\_\_\_  
Day Month Year (Last Birthday)
4. Height: \_\_\_\_\_ 5. Weight \_\_\_\_\_ 6. Eye Colour \_\_\_\_\_
7. Place of Birth: \_\_\_\_\_ 8. Home Town \_\_\_\_\_
9. State of Origin: \_\_\_\_\_ 10. L.G.A: \_\_\_\_\_
11. Nationality: \_\_\_\_\_ 12. Sex: \_\_\_\_\_
13. Residential Address: \_\_\_\_\_
14. The Nearest Bus/Stop to your House: \_\_\_\_\_
15. Postal Address (If different from above): \_\_\_\_\_
16. Religion: \_\_\_\_\_ Denomination: \_\_\_\_\_
17. Name and Address of Church: \_\_\_\_\_

### SECTION B - PARENT'S DATA

18. Father's Name (in Full): \_\_\_\_\_ Relationship: \_\_\_\_\_
19. Father's Address: \_\_\_\_\_
20. Occupation: \_\_\_\_\_ Position Held: \_\_\_\_\_
21. Telephone Number (Home): \_\_\_\_\_  
(Office) \_\_\_\_\_ (Mobile): \_\_\_\_\_
22. E-mail Address: \_\_\_\_\_
23. Mother's Name (in Full): \_\_\_\_\_
24. Mother's Address: \_\_\_\_\_
25. Occupation: \_\_\_\_\_ Position Held: \_\_\_\_\_
26. Telephone Number (Home): \_\_\_\_\_  
(Office) \_\_\_\_\_ (Mobile): \_\_\_\_\_
27. E-mail Address: \_\_\_\_\_
28. Parent's Religion: \_\_\_\_\_ Denomination: \_\_\_\_\_

### SECTION C - CANDIDATE BACKGROUND

29. Name and Address of School Last Attended: \_\_\_\_\_
30. Last Class: \_\_\_\_\_
31. Candidate Signature and Date: \_\_\_\_\_

### FOR OFFICIAL USE ONLY

Section Tests Identification Slip 000109

- Name of Candidate: \_\_\_\_\_
- Form No: \_\_\_\_\_
- Examination Date: \_\_\_\_\_
- Time: \_\_\_\_\_
- Venue: \_\_\_\_\_

Passport  
Photo

Note: Detach and brings this slip to the selection Tests Hall