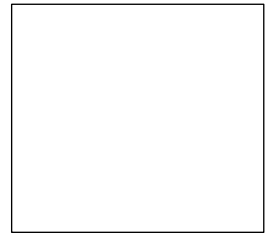


UBTH INSTITUTE OF HEALTH TECHNOLOGY

SCHOOL OF BIOMEDICAL TECHNOLOGY

UNIVERSITY OF BENIN TEACHING HOSPITAL P.M.B 1111, BENIN CITY.

FORM A



APPLICATION FORM FOR ADMISSION.

EXAMS SCORE: .....

INITIAL CHOICE OF INSTITUTION: .....

PLEASE CAREFULLY COMPLETE IN BLOCK LETTERS

(1) SURNAME: .....

(2) OTHER NAMES IN FULL:.....

(3) DATE OF BIRTH: DAY/MONTH/YEAR: ..... (4) GENDER:.....

(5) LOCAL GOVT. OF ORIGIN:.....

(6) HOME ADDRESS:.....

(7) STATE OF ORIGIN:.....

(8) POSTAL ADDRESS: .....

(9) PHONE/ G.S.M. NO: .....

(10) MARITAL STATUS:.....

(11) MAIDEN NAME (Where applicable):.....

(12) POST PRIMARY SCHOOL ATTENDED WITH DATES:

i. ....

ii. ....

iii. ....

iv. ....

v. ....

(13) QUALIFICATION OBTAINED WITH DATE:

i. ....

ii. ....

iii. ....

iv. ....

v. ....

O' LEVEL RESULTS

WAEC/NECO/NABTEB

1<sup>ST</sup> SITTING

YEAR:.....

| SUBJECTS             | GRADE |
|----------------------|-------|
| (1) English language | ..... |
| .....                |       |
| (2) Mathematics      | ..... |
| (3) Chemistry        | ..... |
| (4) Physics          | ..... |
| (5) Biology          | ..... |
| (6) .....            | ..... |
| (7) .....            | ..... |
| (8) .....            | ..... |
| (9) .....            | ..... |

WAEC/NECO/NABTEB

2<sup>ND</sup> SITTING

YEAR:.....

| SUBJECTS             | GRADE |
|----------------------|-------|
| (1) English language |       |
| (2) Mathematics      | ..... |
| (3) Chemistry        | ..... |
| (4) Physics          | ..... |
| (5) Biology          | ..... |
| (6) .....            | ..... |
| (7).....             | ..... |
| (8) .....            | ..... |
| (9) .....            | ..... |

14 NAME AND ADDRESS OF SCHOOL:

.....  
.....

TELEPHONE /G.S.M NO:.....

15) NAME AND ADDRESS OF NEXT OF KIN:

(1) .....  
(2) .....

TELEPHONE G.S.M NO:.....

(1) .....  
(2) .....

SIGNATURE WITH DATE:.....

THIS FORM MUST BE COMPLETED AND ACCOMPANIED WITH:

- a) Photocopies of Academic or professional Certificates, Birth Certificate or Age Declaration. (Marriage Certificate Where applicable.
- b) Three recent coloured Passport Photographs, one attached to Form A.