

# THOMAS ADEWUMI COLLEGE, OKO



Adewumi Drive, P.M.B. 1050  
Omu-Aran, Kwara State, Nigeria  
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Affix  
Two Passports  
Photographs

## APPLICATION FOR ADMISSION

It is essential that this form is completed in full.

### Personal Information On Applicant

|                  |                      |                   |                      |      |                      |
|------------------|----------------------|-------------------|----------------------|------|----------------------|
| Surname:         | <input type="text"/> | Other Names:      | <input type="text"/> |      |                      |
| Date of Birth:   | <input type="text"/> | Sex:              | <input type="text"/> | Age: | <input type="text"/> |
| State of Origin: | <input type="text"/> | Local Govt. Area: | <input type="text"/> |      |                      |

### Center Preferred for Entrance Examination:

|                          |                          |                          |                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Ilorin      Oko      Ibadan      Lagos      Abuja      P/Harcourt      Overseas  
(Please tick your preferred centre and attach primary IV, V, and VI Report Sheet)

### Applicant's Present School

|                                     |                      |                |                      |  |  |
|-------------------------------------|----------------------|----------------|----------------------|--|--|
| Name of Applicant's Present School: | <input type="text"/> |                |                      |  |  |
| Year of Entry:                      | <input type="text"/> | Present Class: | <input type="text"/> |  |  |
| Name of Head:                       | <input type="text"/> |                |                      |  |  |
| Address:                            | <input type="text"/> |                |                      |  |  |
| Tel. No:                            | <input type="text"/> | E-Mail:        | <input type="text"/> |  |  |

### Parental Information

|                      |                      |
|----------------------|----------------------|
| Father's Full Name:  | <input type="text"/> |
| Father's Profession: | <input type="text"/> |

Father's Business Address:

Telephone No:

Fax Number:

E-Mail:

Mother's Full Name:

Mother's Profession:

Mother's Business Address:

Telephone No:

Fax Number:

E-Mail:

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### ***Mailing Address***

Parents' Permanent Mailing Address:

Second Mailing Address:

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### ***Guardians (to be completed by parents who are resident Overseas)***

*The Governors insist that every pupil whose parents are resident abroad must have a guardian in this country who will give a written undertaking to help the pupil make arrangements for holidays and, in general, be available for consultation on any matter that may arise during term time.*

Guardian's Name

Address:

Tel. No:

(Office)

Tel. No:

(Home)

E-Mail:

Relationship if any:

### ***Background Information***

Name of Brother or Sister currently in School:

Name & Address of Pupils for future admission:

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### ***Payments:***

Receipt No:

Amount:

Signature: