ADEYEMI COLLEGE OF EDUCATION
ONDO

Form No.………

DEPARTMENT OF COMPUTER SCIENCE
DIPLOMA IN COMPUTER STUDIES

Admission Form

1. Applicant's Name..
   Surname first (in capital letter)   other names

2. Gender: Male ( ) Female ( )   Marital Status:…………………..………

3. Date of Birth:........................... Place of Birth:…………………………. Nationality:……………….………

4. State of Origin:……………........L.G.A.:……………………………………. Senatorial District:……………………………

5. Contact Address..

6. Applicant's Phone No:………………....………….E-mail:……………………………………..….………………..

7. Name and Address of Next of Kin:…………………………………………………………………..……..
   …………………………………………………………………………Phone No………………………………………..

8. Parents/Guardian Phone No..

9. Name and Address of Spouse……………………………………………………………………………………
   …………………………………………………………………Phone No…………………………………………..

10. Educational Background: Institutions Attended with Date:
    ……
    ……

11. Qualifications with Date:
    ……
    ……………………………………………………………………………………..…………………………..……………

12. Name and Address of two (2) Guarantors who must not be below the status of Lecturer III, Clergy, Lawyer, Principal etc.
    (i)   …………………………………………………………………………………………………….……..
    (ii)   ………

13. Select Preferred Programme: **Certificate** ☐ **Diploma** ☐   Year of Admission: ………………

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Completed application forms should be returned to the office of the HOD, Department of Computer Science, ACE, Ondo with the following: (i) a recent passport photographs (ii) originals and photocopies of credentials

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FOR OFFICIAL USE ONLY

1. Credentials verified by ………………………………………….………………Status:………………………………

2. Qualified for Admission: (   )

3. Not qualified for admission (   )

4. Admitted for:……

5. Admission Number:………………………………………………..Session of Admission:………………..…….

Signature & Date:……………………………………………………………………………………………