

## **DELTA CAREERS COLLEGE**

## **ADVANCE LEVEL (A-LEVEL)**

Passport

Photograph

No. 160 AIRPORT ROAD, UGBOROKE P. M. B. 2281, WARRI, DELTA STATE, NIGERIA.

CENTRE
EXAM NO
AMOUNT PAID
RECEIPT NO

## **ENTRANCE FORM**

GENERA	AL INFORMATION						
(a) NAMESEX							
(b) AGE	DAT	DATE OF BRITH PLACE OF BIRTH					
	(c) NATIONALITY STATE OF BRITH						
		GROVT. AREA HOME TOWN					
(e) POS	TAL ADDRESS						
(g) E-MAIL ADDRESS							
	ACADEMIC RECORD						
	LAST SCHOOL ATTENED						
N	NAME OF SCHOOL CLASS OR CERTIFICATE F		RTIFICATE PASSED	DATE OF LEAVING	REASONS FOR LEAVING		
•				•			
HEALTH	HEALTH RECORD						
NAM	E OF ILLNESS SUFFERED	IN THE PAST	YEAR	HOSPITAL VISITED	PRESENT HEALTH SITUATION		
	FAMILY RECORD						
I. NAME AND ADDRESS OF MOTHER				II. NAME AND ADDRESS OF FATHER			
E-MAIL:				E-MAIL:			
I. Mother's occupation				II. Father 's occupation			
1. Wother 3 occupation				Tuther 5 occupation	<u></u>		
LEVEL A	PPLYING FOR						
	TTED, WILL YOU STA		DING HOUSE? Y	ES NO D			
NAME A	AND ADDRESS OF SPO	ONSOR					
IN CASE	OF EMERGENCY, CO	NTACT					
STUDENT'S SIGNATURE				<del></del>	DATE		
			OFFI	CE USE ONLY			
	Dagging	al D		Dete			
	Received By: Checked By:						
		•		Date			
	Sign			Date:			