LAGOS STATE UNIVERSITY, OJO

BADAGRY EXPRESSWAY, OJO P.M.B 1087, APAPA LAGOS, NIGERIA.

Website: www.lasu.edu.ng
E-mail: admissions@lasu.edu.ng

Registration No.									

APPLICATION FORM FOR INTER-UNIVERSITY TRANSFER

1.	PERSONAL DATA									
a.	Name:				Mr./Miss/Mrs.					
	First name	Middle Nan			name					
		(Attach proof if na								
b.										
c.	Sex:			d. Date of Birth:						
e.		ried or Single)	f.							
g.	_	erian only)	h.	Nationality:	(Non-Nigerians)					
i.	Local Government Area (Nigerians only)								
2.	OTHER PERSONAL DA	TA								
a.	Name and Address of Par	ents/Guardians or N	ext o	of Kin:						
b.	Extra-Curriculum Activitie	s (e.g. Sports/Hobbi	es):							
c.	Special Applicant: Mark '>	Special Applicant: Mark 'X' in relevant box:								
	Blind Deaf	Deaf & Dumb		Mature Stude	nt Others (Specify)					
3.	ACADEMIC RECORD									
	a. Institution attended with dates:									
	Name of Institution	period			Qualification Obtained					
	Name of Institution	From		То	Qualification Obtained					

b. PLEASE TURN TO BACK PAGE: COPIES OF YOUR CREDENTIALS SHOULD BE ATTACHED.

C. **EXAMINATIONS PASSED OR ENTERED FOR:**

Exam. Name Exam. Date Exam. No.

(Photocopies of Certificate or Statement of Results must be attached)

SUBJECT

Grade

LXaiii. Italiic	LXaiii. Date	LXaIII. NO.	SOBJECT	Grade			
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given in this for information give inter-university to	m is to the bes	st of my knowle n will automati ue with my cour	hereby edge and belief, corre ically disqualify me rse of study in the Univ application.	ect. Any false from being c	or incomplet onsidered fo		
(Dat	te)			(Signature)			