



LAGOS STATE UNIVERSITY, LAGOS, NIGERIA
STAFF IDENTITY CARD
DATA FORM

FILL IN CAPITAL LETTERS USING BLACK INK ONLY

CTRL NO.:

/

PF NO:

BLOOD GROUP:

Surname:

First Name:

Other Names:

Sex:

M

F

Marital Status:

GSM No:

E-Mail Address:

Please tick as appropriate

Staff Category:

Academic

Non Academic

STATE OF ORIGIN:

If Non-Academic,

Senior

Junior

DATE OF BIRTH:

Grade Level:

Designation:

Dept./Unit

Faculty/School:

Name of H.O.D.

Signature

Registrar

Signature

1'X'

Passport photo

Passport photograph **must** be on a white background '**only**'.

ALL COMPLETED AND DULY SIGNED APPLICATION FORM SHOULD BE **SUBMITTED DIRECTLY** BY THE STAFF TO STAFF WELFARE UNIT OF THE REGISTRY.

Staff's Signature (Use BLACK Pen Only)

For official use only

Batch No:

Processed by: Date of Production:

Time: Signature: