



**LADOKE AKINTOLA**  
UNIVERSITY OF TECHNOLOGY,  
OGBOMOSO

**THE POSTGRADUATE SCHOOL**

**STUDENT BIODATA FORM**

Form  
PG 02

Department/ Faculty: \_\_\_\_\_

Names in Full: \_\_\_\_\_  
(Surname in Caps) (Other Names)

Year of Admission: \_\_\_\_\_

Mode of Study Part-Time  Full-Time

Maiden Name: \_\_\_\_\_ Matriculation No: \_\_\_\_\_

Birth Date: \_\_\_\_\_ State of Origin: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Country: \_\_\_\_\_

Next of Kin: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date of First Registration: \_\_\_\_\_  
(Current Programme)

Diploma/Degree Programme: \_\_\_\_\_

Campus Address: \_\_\_\_\_

Total Number of Semester Already Completed: \_\_\_\_\_

Permanent Postal Address: \_\_\_\_\_

Sponsor's Name & Address: \_\_\_\_\_

Previous Universities Attended:

NAME OF UNIVERSITY	DEGREE OBTAINED	GRADE (CLASS)	DATE OF GRADUATION

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_