

LANDMARK



Landmark College

5/11, Olayinka Ogunfile Street, Unity Estate, Owutu, behind
Lagos State Rehabilitation Centre, Off Isawo Road, Ikorodu, Lagos.
info@landmark-college.org, www.landmark-college.org
01-3427926, 01-3427927, 08033037631, 07046065241, 07046065242

Affix four (4)
recent passport
photographs

STUDENT REGISTRATION FORM

STUDENT DETAILS

NAME:

Surname

First Name

Middle Name

Date of Birth:

Gender

Male

Female

Place of Birth:

Religion

Nationality

State of Origin

L.G.A

Contact Address

Home Address

Exam Centre

PARENT / GUARDIAN INFORMATION

NAME: Mr./Mrs./Dr./Engr./Chief

Occupation:

Mobile No

Home Tel No

Contact Address

E-mail Address

Employers Name

Office Address

EDUCATIONAL BACKGROUND**School Attended / Examination taken and Result****Name of School:****Class Last Attended:****Reason for Leaving the School:**

Examination Taken and year	Examining Board	Subject	Result

Class which Admission is sought

Tick as appropriate

 Day Boarding**MEDICAL (TICK AS APPROPRIATE)****Are you vulnerable to a carrier of any of the following diseases:**
 Tuberculosis
 Sickle Cell Anaemia
 Asthma
 None
Others (Specify).....**Blood Group**
 A
 B
 AB
 O
Genotype
 AA
 AS
 SS
 SC

How many times (approx) have you visited the doctor for treatment within the last two (2) years?

What was the nature of your illness during the last two (2) years?

Please give the name and address of your family doctor**Name:****Address:**

OTHER INFORMATION

No. of Siblings: _____

Position in the family: _____

FATHER'S INFORMATION

Full Name _____

Occupation _____

Place of Work _____

Office Address _____

E-mail Address _____

Phone Number(s) _____

MOTHER'S INFORMATION

Full Name _____

Occupation _____

Place of Work _____

Office Address _____

E-mail Address _____

Phone Number(s) _____

GUARDIAN'S INFORMATION *(if parents live outside Lagos)*

Full Name _____

Occupation _____

Place of Work _____

Office Address _____

E-mail Address _____

Phone Number(s) _____

DECLARATION**Student Declaration**

I, _____ solely declare that;

- i. I will obey all school rules and regulation
- ii. I will not involve in any examination malpractices
- iii. I will not join any illegal association or Society
- iv. I will not engage myself in any activities that will bring disrepute to the image of the school

Signature _____ Date _____

Parent Declaration

I stand surety that my child/ward will conform to the declarations stated above and other implied rules and regulations of the school.

Signature _____ Date _____

OFFICIAL USE ONLY

Date of writing aptitude test

Result of Aptitude Tests

Subjects	%Scores	Remarks
English		
Mathematics		
Qualitative Aptitude		
Verbal Aptitude		
Oral Interview		
Average Score		

Candidate is suitable for Admission: YES NO

Class Admitted into:

APPROVAL

Admission No:

I.D Card No

Class:

Year:

Term:

Amount Payable (N):

Name:

Designation:

Signature:

Date:

LANDMARK**COLLEGE***... marked for excellence*