



UNIVERSITY OF IBADAN
SCHOOL OF BUSINESS



DIGITAL BRIDGE INSTITUTE
Technology. Innovation. Education

FORM FOR

ADMISSION INTO POST-GRADUATE PROGRAMMES

(A supplemental guide to fulfilling admission requirements)

: This form must be completed using CAPITAL LETTERS

Surname _____ First Name _____

Nationality _____ State _____

LGA of Origin _____ Place of Birth _____

Passport No _____ Date of Birth (YYYY/MM/DD) _____

National ID No _____ Driver's License No _____

Sex _____ Phone Number(s) _____

Single or Married _____ E-mail Address _____

Contact Address (The School will mail all Correspondence to the candidate through this address) _____

Permanent Home Address (if different from above) _____

Name and Address of Person to be contacted in case of emergency (State your relationship with the person) _____

Specify any health condition for which you need continuous medication (e.g. Epilepsy, diabetics etc.) _____

Desired Programme _____

Desired Programme Option (Full-Time/Part-Time) _____

EDUCATION ⁽¹⁾

University/Polytechnic/College _____

City _____ State _____

A

CERTIFICATE (M.Sc./B.Sc./BA/B.ENG /HND/etc.)	ATTENDANCE (year)		COURSE/PROGRAMME	GRADE	OFFICIAL USE
	From	To			

University/Polytechnic/College _____

City _____ State _____

B

CERTIFICATE (M.Sc./B.Sc./BA/B.ENG /HND/etc.)	ATTENDANCE (year)		COURSE/PROGRAMME	GRADE	OFFICIAL USE
	From	To			

G

Awards or other Evidence of Achievements that have been recognized.					
NAME OF ORGANIZATION	TYPE OF AWARD	YEAR	ACHIEVEMENT	DOCUMENTS IN SUPPORT	OFFICIAL USE

H

Candidate Referee(s): Title/Position, Contact Information - including Phone Number (s)	OFFICIAL USE

DOCUMENTS IN SUPPORT: Three Referee Reports or Letters of Recommendation.

I

Passport Photograph of Candidate	
Student's Passport Photograph	Student's Passport Photograph
Student's Passport Photograph	Student's Passport Photograph

Declaration by Applicant

I hereby declare that the particulars supplied above, are true to the best of my knowledge and belief. I am aware that withholding any information and/or giving false information automatically disqualifies me from gaining admission. If admitted, I shall regard myself bound by Statutes, Ordinances and Regulations of the programme in so far as they affect me.

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Date

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Signature of Applicant