



CATHOLIC DIOCESE OF ISSELE-UKU
MARYMOUNT COLLEGE

BOJI-BOJI OWA, DELTA STATE.
08108259906, 09011774525



ENTRANCE FORM

1. NAME OF CANDIDATE

(A) Surname: _____

(B) Other Name: _____

(C) Other Name: _____

2. DATE OF BIRTH _____ AGE _____

3. PLACE OF BIRTH: _____

4. RELIGION: _____

5. DENOMINATION: _____

6. CONTACT ADDRESS: _____

7. HOME TOWN: _____

8. LOCAL GOVERNMENT ORIGIN: _____

9. STATE OF ORIGIN: _____

10. SCHOOL(S) ATTENDED WITH DATE: _____

(A): _____

(B): _____

(C): _____

11. PRESENT CLASS: _____

12. FATHER'S NAME: _____

PHONE: _____

13. MOTHER NAME: _____

PHONE: _____

14. FATHER OCCUPATION: _____

15. MOTHER OCCUPATION: _____

16. SPONSOR'S NAME: _____

PHONE: _____

17. CANDIDATE'S SIGNATURE: _____

DATE: _____

Fix a
recent
passport

N.B: Completed Application Forms should be submitted to the School on or before Dated Examination

✂️ DETACH THIS SLIP ✂️

CATHOLIC DIOCESE OF ISSELE-UKU
MARYMOUNT COLLEGE, B.B. OWA, DELTA STATE.



Name of Candidate: _____

Examination Number: _____

Date of Examination: _____ Time: _____

Last Date for Submission of Form: _____

Fix a
recent
passport

**(Bring this slip along with you to the examination hall including writing materials
: a mathematical set, biros, pencil and ruler only)**

REQUIREMENTS FOR EXAM AND INTERVIEW

BRING ALONG THE FOLLOWING PHOTOCOPIES / ORIGINAL

2ND TERM'S RESULT

2 RECENT PASSPORT PHOTOGRAPHS

BIRTH CERTIFICATE

BAPTISMAL CARD (IF CATHOLIC)

PRIMARY 6 RESULT FOR JSS 2 & 3 STUDENTS

JSS 3 BECE RESULT FOR SS 1 STUDENTS

