



UME E-REGISTRATION FORM

RECENT PASSPORT
PHOTO NOT OLDER
THAN 3 MONTH

PLEASE FILL THIS FORM IN BLOCK LETTERS & STAPLE TWO
CURRENT PASSPORT PHOTOGRAPHS OF YOURS WITH IT.

PERSONAL DATA

FIRST NAME

MIDDLE NAME

SURNAME

DATE OF BIRTH DAY: MONTH: YEAR:

SEX

MARITAL STATUS

PHYSICALLY CHALLENGED

ADDRESS

TOWN

STATE

EMAIL ADDRESS

NATIONALITY

STATE OF ORIGIN

LOCAL GOVT. AREA NAME

STATE OF EXAM TOWN

EXAM TOWN

FIRST CHOICE

COURSE

FACULTY

SECOND CHOICE

COURSE

FACULTY

PHONE NUMBER

UME SUBJECTS

1.	USE OF ENGLISH
2.	<input type="text"/>
3.	<input type="text"/>
4.	<input type="text"/>

O'LEVEL SUBJECTS

GRADE

	O'LEVEL SUBJECTS	GRADE
1.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/>
8.	<input type="text"/>	<input type="text"/>
9.	<input type="text"/>	<input type="text"/>
NUMBER OF SITTING (MAXIMUM OF 2)		

SCRATCH CARD PARAMETER (FOR OFFICIAL USE ONLY)

Pin Number

Serial Number = Username