

# **CHANGE OF INSTITUTION FORM**

1.	STU	JD	<b>EN</b>	Т`.	S	PE	ER	SC	10	JA	VL.	D	A	T	Δ
----	-----	----	-----------	-----	---	----	----	----	----	----	-----	---	---	---	---

(A) Name:		
SURNAME	MIDDLE	FIRST
(B) GENDER:	(C) DATE OF BIR	RTH:
(D) NATIONALITY:	(E) STATE OF ORI	GIN:
(F) LOCAL GOVERNMENT AREA: _		
(G) CONTACT ADDRESS:		
(H) PHONE NUMBER:		

### 2A. DETAILS OF O'LEVEL RESULTS

Examination:						
Ye	Year of Examination:					
Reg	Reg. Number:					
Sub	Subject (s) Grade					

#### **2B. DETAILS OF O'LEVEL RESULTS**

Examination:				
Year of Examination:				
Reg. Number:				
Subject (s)	Grade			

### 3. UTME DETAILS

(A)

Registration Number:				
Year of Examination:				
Subject(s) Scor				
	Use of English			
	Aggregate			

## (B) PREVIOUS CHOICES

Choice	Institution	Course	Course Code
1st Choice			
2 <sup>nd</sup> Choice			

### 4. NEW CHOICE: PLEASE STATE UNIVERSITY/COURSE

Institution	Course

DO SOLEMNLY DECLARE
TION ON THE JAMB PORTAL TO AFE BABALOLA
-

### 6. FOR OFFICIAL USE

### NAME, SIGNATURE AND DATE

Checked by	
Approved by	
Remarks	

### NOTE:

Attached Photocopies of O'Level Results, JAMB Result, JAMB Change of Institution Slip and Receipts of Purchase

ANY FALSE DECLARATION RENDERS THIS FORM/ADMISSION INVALID