Printed Copy Not Required For Admission Purposes



UNIVERSITY OF LAGOS Undergraduate APPLICATION FORM



Personal Details		
Application Number	202551667536JF	
Surname	Saheed-Bashiru	
First Name	Abdulllah	
Middle Name	Olamide	
Gender	Male	
Date Of Birth	25, July 2007	
State Of Origin	Oyo	

Contact Informa	tion
Address	5B folorunsho Kazeem, Magodo Phase 2
State	Lagos
City	Kosofe
Email D	Asaheedbashiru@gmail.com
Mobile Number	08149572313

Proposed Course Of Study		
Department	STATISTICS	
Programme	Bachelor of Science in Data Science	

Examinations		
Examination	WASSCE	
Examination Period	NOV / DEC	
Examination Year	2023	
Examination Number	5251404748	
School / Centre Name	Ojota senior secondary school	
ENGLISH LANGUAGE	B3	
MATHEMATICS PHYSICS	B3 CO O O	Pi
CHEMISTRY	B3	
FURTHER MATHEMATICS	C5	
ECONOMICS	C5	
GEOGRAPHY	B3	
ISLAMIC STUDIES	A1	

Attention:

Print a copy of the completed application and proof-read carefully. If you find any errors, you can edit your application until the deadline.

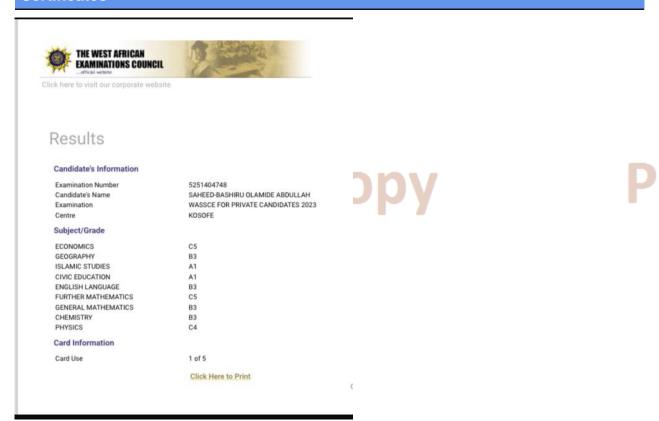
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Please note that you can continue to edit this application until 31/08/2025 00:00:00

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Civic Education	A1	
Examination	UTME	
Examination Period		
Examination Year	2025	
Examination Number	202551667536JF	
ENGLISH LANGUAGE	73 ODV	Prol
MATHEMATICS	74	161
PHYSICS	65	
CHEMISTRY	81	
TOTAL	293	

Certificates



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