



# HORIZON EDUCATIONAL CONSULTANCY

## APPLICATION FORM

### Personal Information

First /given Name Ermiyas  
Middle Name Molla  
Last /family / surname Abebe  
Date of birth from Month /Day/ Year 11 / 27 / 2003

### Parent information

#### Parent 1

First /given name Sensit  
Middle name Haile  
Last /Family /Surname Ageta  
Father occupation Driver  
Father education status Diploma

#### Parent 2

Molla  
Abebe  
Yimam  
Security  
None

Most recent secondary school name MenBere Mengist ST. GABRIEL Monastery School  
Date of Entry to school 01/Sep/2018  
Do you graduated from this school Yes  
Graduating GPA ? 315  
Major you want to study Computer Science , Marketing manag. Economics  
Phone number +251 965168285 , \_\_\_\_\_  
Email Address ermac1012468@gmail.com  
Do you have cosigner? \_\_\_\_\_

I assure that the above information is true and correct to start the application process.

Signature epus

Date 12/04/2023