LEADERS CAMPUS

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+229 96047216, 51838377, 68262958 www.escaeunibenin.edu.bj

Carre 0297, Sokandji Carrefour Zone Parc

APPLICATION FOR ADMISSION

FOR OFFICE USE ONLY

Application Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Date: ☐☐☐☐☐☐☐☐ File No: ☐☐☐☐☐

EDUCATIONAL BACKGROUND

Please provide information regard your educational background below

	Name of School (please use completed name)	Location	Year of Entry	Year of Graduation	Certificate Obtained
Preparatory School					
Secondary School (High School/College)					
University					

'O' Level Result Details *(WAEC/NECO/GCE, Etc.)*

	Examination Type	Date and Year	Subject	Grades
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

NUMBER OF SITTING: ☐ *One Sitting* ☐ *Two Sitting* ☐ *Others (specify)*

NB: photocopies of all diplomas, certificates and course transcripts awarded for these qualifications must be with this application. In addition to diploma and certificates, international, applicants are provide official copies of their entire course transcripts

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