



LAGOS STATE UNIVERSITY, OJO
OFFICE OF THE VICE CHANCELLOR
Alumni Relations Office

*Please affix a
coloured passport
sized photograph
here.*

The Alumni Relations Office in collaboration with LASU Alumni Association is in the processes of creating a data base of all Alumni and Alumna of Lagos State University in Nigeria and in Diaspora. The underlisted are the information required from you as part of the data base. Kindly provide the information, please

ALUMNI DATA FORM

1. Surname (in capital letters) *Prof. Dr./Mr./Mrs./Chief, etc.:* _____
2. Other Names: _____
3. Maiden Name: _____
4. Next of Kin: _____
5. Date of Birth: _____
6. Permanent Address: _____
7. Telephone No: (personal & official): _____
8. Year of Entry: _____
9. Year of Graduation: _____
10. Faculty/College: _____
11. Department: _____
12. Degree/Diploma/Certificate Obtained: _____
13. Present Employment: _____
14. Present Post/Rank: _____
15. Membership of Professional Bodies: _____
16. State of Origin: _____
17. E-mail Address: _____
18. Hobbies: _____
19. Special Interest: _____

Signature

Date

*Please return to: Alumni Relations Office (Vice-Chancellor's Office),
Students Affairs Building, Lagos State University, P. M. B. 0001 FESTAC,
Lagos, Lagos State, Nigeria. Tel: 07028024361 OR 01-7404559*

