



## A.O.S ACADEMY®

(The No.1 Language and Linguistics Institute)

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### APPLICATION FORM

ADMISSION 2019/2020 SEMESTER  
(FRENCH LANGUAGE STUDIES)  
FORM NUMBER: AOS/FLS/19/006

ATTACH  
PASSPORT  
PHOTOGRAPH

### A. APPLICATION DETAILS

- i) PROGRAM: a) BEGINNER                      b) INTERMEDIATE                      c) ADVANCED  
ii) CLASS: a) STUDENT                      b) ADULT  
iii) IF ADULT EDUCATION; a) IN-CLASS                      b) PRIVATE

### B. PERSONAL DATA

- 1) Name (Surname First): \_\_\_\_\_  
2) Contact Address: \_\_\_\_\_  
\_\_\_\_\_  
3) Sex: \_\_\_\_\_ 4) Date of Birth: \_\_\_\_\_  
5) Marital Status: \_\_\_\_\_ 6) Telephone: \_\_\_\_\_  
7) Whatsapp No.: \_\_\_\_\_ 8) Email: \_\_\_\_\_  
9) State of Origin: \_\_\_\_\_ 10) Nationality: \_\_\_\_\_  
11) Place of Birth: \_\_\_\_\_ 12) Local Government Area: \_\_\_\_\_  
13) Maiden Name (If Married - Female): \_\_\_\_\_

14) Applicant Signature: \_\_\_\_\_

**C. FINAL LECTURE TIME-TABLE OR FREE PERIODS**

<b>DAYS</b>	<b>TIMES (PLEASE INDICATE IF FREE(F) OR ENGAGED(E))</b>
<b>Monday</b>	
<b>Tuesday</b>	
<b>Wednesday</b>	
<b>Thursday</b>	
<b>Friday</b>	
<b>Saturday</b>	
<b>Sunday</b>	

**D. NEXT OF KIN INFORMATION/ SPONSORS/ REFEREES:**

16a) Name: \_\_\_\_\_

b) Address: \_\_\_\_\_

c) Relationship/ Position/ Rank: \_\_\_\_\_

d) Occupation: \_\_\_\_\_

e) Telephone: \_\_\_\_\_

**E. ACADEMIC DATA**

17) NYSC STATUS: a) Discharged b) Awaiting c) In Progress

18) Level/ Proficiency in French: a) Elementary b) Intermediate c) Fluent d) 100  
e) 200 f) 300 g) 400

19) Course in View: \_\_\_\_\_

**ii) SECONDARY EDUCATION: WASSCE, SSCE, GCE, NECO, JAMB:**

First Sitting: \_\_\_\_\_

Exam Name: \_\_\_\_\_

Exam Date: \_\_\_\_\_

Exam No.: \_\_\_\_\_

S/NO	SUBJECTS OFFERED	GRADE
1.		
2.		
3.		
4.		
5.		
6.		
7.		

**iii) POST SECONDARY EDUCATION:** Institution(s) Attended with Dates

Name(s) of Institution(s)	Qualification(s) In View	Year of Study

Distinction/Awards & Prizes Ever Won: \_\_\_\_\_

**F. EMPLOYMENT HISTORY:** Past Appointments

Employer	Post	Period (FROM – TO)

**G. PROGRAMS DONE IN A.O.S. ACADEMY®**

Previous Program Applied For in the institute: \_\_\_\_\_

Grade: \_\_\_\_\_ Year: \_\_\_\_\_

Any other Information: \_\_\_\_\_

**H. PAYMENT DETAILS**

I) TUITION FEE: \_\_\_\_\_

II) RECEIPT NO. / TRANSFER CODE / TEXT: \_\_\_\_\_

III) PAYER'S NAME: \_\_\_\_\_

IV) PHONE NUMBER: \_\_\_\_\_

V) DATE OF PAYMENT: \_\_\_\_\_

Payments of the tuition fee should be paid into the A.O.S Academy's temporary account provided below (please endeavor to use your personal name and phone number as that of the payer):

**Bank – GTBANK**

**Bank Name – Shoderu Azeez Olanrewaju**

**Bank Account Number – 0149010088**

Candidates are required to attach their receipts of both the application form and tuition payments, and all other relevant credentials such as Passport Photograph, secondary or post-secondary result and/or NYSC certificate in order to fully verify payments, educational levels and issue the recognized institute's receipts. When payment has been received, you will be added up to the Academy's official Whatsapp group for communicating information.