



# UNIVERSITY OF ENTREPRENEURSHIP & TECHNOLOGY

Please paste passport size (35 mm (w) x 44 mm (H)) colored photograph with white background here. Photo should not exceed borders. Do NOT staple.

## APPLICATION FOR ADMISSION

### To the Applicant:

This application shall not be acted upon unless the following documents and fees are received by the Graduate School on or before May 30 for the first session (July-June) admission or October 30 for the second session (January-December) admission:

<b>01. Your Full Legal Name</b>	Family Name	First Name	Middle Name
---------------------------------	-------------	------------	-------------

--	--	--	--

<b>02. Place of Birth</b>	<b>Date of Birth</b>
---------------------------	----------------------

<b>03. Citizenship</b>	<b>4. Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female
------------------------	--

<b>05. Civil Status</b>	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Widow/er	<input type="checkbox"/> Divorced
-------------------------	---------------------------------	----------------------------------	-----------------------------------	-----------------------------------

<b>06. If Employed Occupation/Postion</b>
---

<b>07. Employed (Institution or Company)</b>
--

<b>08. Employer's Mailing Address</b>
---------------------------------------

<b>09. E-mail Address</b>
---------------------------

<b>10. Mobile &amp; Telephone</b>
-----------------------------------

### 11. Academic background list all schools previously attended (Please use additional sheet if necessary)

Institution(s) Attended	Degree	Major Field	Date Received	Final Grade

### 12. Degree Sought

<b>Non Thesis Program</b>	<b>Thesis/Dissertation Program</b>
<input type="checkbox"/> Diploma Certificate <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters	<input type="checkbox"/> Doctoral <input type="checkbox"/> Post Doctoral <input type="checkbox"/> Post Doctoral Fellowship

<b>13. Specific area of specialization</b>
--

**14. Session for which you are applying** ☐ First Session (July -June) ☐ Second Session (Dec -Jan)

**15. Have you previously applied for admission to graduate studies at UET ?**

☐ Yes ☐ No Is yes, was it ☐ Approved ☐ Denied ☐ Still Pending **Date Submitted** \_\_\_\_\_



16. Your most recent and most pertinent occupational experience:			Inclusive Date
Name and Location of Employing Agency	Position	From	To

17. Please list your membership in honor and professional organizations. (Please use additional sheet if necessary)

18. Please list scholarships, honors, prizes and awards you have received. (Please use additional sheet if necessary)

19. Publications: Give the complete bibliographical information. (Please use additional sheet if necessary)

20. Unpublished research papers or theses (Please use additional sheet if necessary)

**Declaration: ( To be signed by all students)**

I confirm that the information given in this form is correct & complete and I have personally signed this form with full consent. I agree to all the Terms and conditions of University of Entrepreneurship and Technology-UET, mentioned on the website of the university (www.uet.education). I understand that UET is a private university, registered in the state of Delaware, USA and having its main campus situated in Nigeria. I have checked their recognitions and I am fully aware of the same. I also understand that Fees once paid will not be refunded under any circumstances. All disputes shall be subject to jurisdiction of law at USA. I Understand that UET has chosen to not get accreditation from an accrediting agency recognized by the United States Secretary of Education. In the United States, many licensing authorities require accredited degrees as the basis for eligibility for licensing. In some cases, accredited colleges may not accept for transfer courses and degrees completed at unaccredited colleges, and some employers may require an accredited degree as a basis for eligibility for employment. I confirm that the information given in this form is true, complete and accurate and no information requested or other materials information has been omitted.

**Signature of Applicant**

**Date**

**OFFICE USE ONLY**

☐ Approval Recommended

☐ Denial Recommended

**Registration Adviser**

**President, Graduate Admission Committee**

**Head Dept. of**