



HONEYLAG COLLEGE
of Arts, Management & Technology

ENTRY / APPLICATION FORM

Ikorodu, Iyana Ipaja & Meiran Annex will be Application / Submission Form Centres

The application & submission Centers Centre.
2nd Floor, Amaden Plaza, Mabushi FCT, Abuja.

1. Personal Details

Field	Details
Surname (Family Name):	_____
Other Names:	_____
Date of Birth (DD/MM/YYYY):	_____
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Nationality:	_____
State of Origin:	_____
LGA (Local Government Area):	_____
Permanent Home Address:	_____
Current Address:	_____
Email Address:	_____
Phone Number:	_____

2. Academic Background

Field	Details
Name of Last School Attended:	_____
Address of School:	_____
Qualification Obtained (e.g. WAEC, NECO, OND, etc.):	_____
Year Obtained:	_____
Grades / CGPA / Division:	_____

3. Desired Programme of Study

Field	Details
Faculty / School (e.g. Creative Arts, Business & Management, Applied Technology, etc.):	_____
Programme / Course Applying For:	_____
Mode of Study:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time / Evening / Weekend
Intended Start Date / Semester:	_____

4. Supporting Documents

Please attach or provide copies of the following:

- Birth Certificate or National ID / International Passport
- Academic Transcripts / Certificates
- Recent Passport-Sized Photograph (two [2])
- Reference / Recommendation Letter (optional but preferred)
- Any Professional or Vocational Certificates (if applicable)

5. Parent / Guardian Information

Field	Details
Name of Parent / Guardian:	_____
Relationship to Applicant:	_____
Address:	_____
Phone Number:	_____
Email Address:	_____

6. Declaration

I hereby declare that the information provided in this application is correct and complete to the best of my knowledge. I understand that falsification or omission may lead to cancellation of admission.

Applicant Signature:	_____	Date: ___ / ___ / _____
Parent / Guardian Signature (if applicant is under 18):	_____	Date: ___ / ___ / _____



HONEYLAG COLLEGE
Of Arts, Management & Technology

7. Office Use Only

Field	To Be Filled by Admissions Office
Application Number:	_____
Date Received:	_____
Amount Paid (if applicable):	_____
Received By (Name & Signature):	_____
Status:	<input type="checkbox"/> Approved <input type="checkbox"/> Pending <input type="checkbox"/> Rejected

Kindly make your payment and attach the corresponding proof of payment along with this form.

Account Name: **HONEYLAG COLLEGE OF BROADCASTING AND MANAGEMENT**

Account Number: **121 263 3228**

Bank Name: **ZENITH BANK**



HONEYLAG COLLEGE
of Arts, Management & Technology

HoneyLag College Contact Info:

Telephone Number: +234 (0) 903 480 8237 / 0812 808 3692

Email: info@honeylagcollege.com

Locations:

- Ikorodu Annex, 306, Shagamu Road, Odogunyan, Ikorodu, Lagos
- Iyana Ipaja Annex, Campus Gate College, 7, Kemi Alex Avenue, Off Ige Street, Abule-Oki, Iyana Ipaja, Lagos
- Meiran Annex, Meiran Hall, Meiran Road, Lagos/Abeokuta Exp. Way, Lagos