

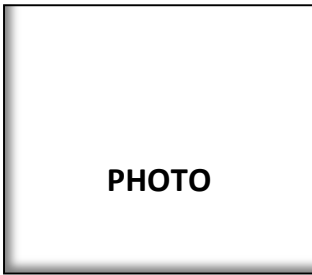


# Adventist University of West Africa

*Excellence. Integrity. Accountability. Unity in Diversity. Selfless Service*

Advent Hill, Robert Field Highway, Schiefflin Township, Margibi County, Liberia

## Office of Admissions, and Records



PHOTO

2020/2021 Semester II

FORM NUMBER: \_\_\_\_\_

### ADMISSION APPLICATION FORM

*(Please Print)*

#### A. PERSONAL INFORMATION

1. Name \_\_\_\_\_  

Last	First	Middle	Maiden
------	-------	--------	--------
2. Current Postal Address \_\_\_\_\_
3. Mother's name \_\_\_\_\_ Living? Yes ( ) No ( )
4. Address \_\_\_\_\_
5. Father's name \_\_\_\_\_ Living? Yes ( ) No ( )
6. Address \_\_\_\_\_
7. Parent/ Guardian Address \_\_\_\_\_
8. Parent/ Guardian's cell # \_\_\_\_\_ Sponsor's Cell # \_\_\_\_\_
9. Parent(s)/ Guardian(s)/Sponsor email address \_\_\_\_\_
10. Academic Program Desired: 1<sup>st</sup> choice \_\_\_\_\_ 2<sup>nd</sup> choice \_\_\_\_\_
11. Do you wish to be a boarding/ dormitory student? Yes ( ) No ( )
12. Date of Birth \_\_\_\_\_ Age: \_\_\_\_\_  

Month	Day	Year
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13. Gender: Male ( ) Female ( )
14. Place of Birth \_\_\_\_\_
15. Student's Email Address \_\_\_\_\_ Cell Number: \_\_\_\_\_
16. Marital Status: Single ( ) Married ( ) Widow/Widower ( )
17. Country of origin \_\_\_\_\_ County of origin \_\_\_\_\_
18. Religious Affiliation \_\_\_\_\_
19. Denomination: \_\_\_\_\_  

(Name of Church if Christian)

*A Seventh-day Adventist Institution of Higher Learning*

Advent Hill, Robertsfield Highway, Schiefflin Township, Margibi County, Liberia • Box # 1162

• Phone: +231-778194654/ +231-886072513 • E-mail: registrar@auwa.edu.lr/admission@auwa.edu.lr

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### B. EDUCATIONAL INFORMATION

List below all Elementary, High Schools, and Universities attended, beginning with the school most recently attended				
Institution	City/State/ Country	Degree Earned and Major/Certificates/WAEC/ WASSCE Division Earned	Dates Attended	Date of Graduation
			From:      To:	
			From:      To:	
			From:      To:	
			From:      To:	

### C. ADDITIONAL INFORMATION

20. How will your education at Adventist University of West Africa be financed?

(a) Scholarship ( )    (b) Parents ( )    (c) Self ( )

20. Have you ever been placed on probation, suspension or dismissal from any school? Yes ( )

No ( ) If yes explain:

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21. Will you abide by the Rules and Regulations of the Adventist University of West Africa?

Yes ( )      No ( )

### ATTESTATION

I attest that the above information is true and accurate knowing fully well that false declaration and misrepresentation of facts can lead to disqualification of my admission at any point in time in the course of my studentship.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

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