



**Centre for Empowerment
of the
DISABLED**
...ability in disability...

11, Gbadamosi Street
Off Boyle Street,
Onipanu, Somolu, LAGOS
Tel: 01 - 894 9033

Please attach a
recent passport photograph

(A) PERSONAL DATA

Names (Surname First)	:		
Date of Birth	:	Sex	:
Contact Address	:		
Marital Status	:	Phone	:
Place of Worship	:		
Religion	:		
Educational Status	:		
School Attended	:		
Course of Study/Grade	:		
Date of Graduation	:	Date pass out (NYSC)	:
Work place	:		

(B) PARENTS/GUARDIAN

Name	:		
Place of Work	:		
Work Status	:	Phone	:

.....
Signature/Date

(C) FOR OFFICE USE ONLY

Approved	<input type="checkbox"/>	Not Approved	<input type="checkbox"/>
Reason		
To Start when		
To Finished when		
Shift		
Student's No		