

Affix Passport
Photograph



Nigerian Air Force
College of Nursing Sciences
NAF Base Mando
P.M.B 21004
Kaduna
Email: nafcollegeofnursing@airforce.mil.ng
Website: www.nafcons.edu.ng

PERSONAL INFORMATION

JAMB REGISTRATION NUMBER: SVC NO (Military Personnel):
RANK (Personnel): ARM OF SERVICE (Personnel):
FULL NAME (Surname First):
UNIT/HOME ADDRESS:
.....
EMAIL ADDRESS: PHONE NO:
DATE OF BIRTH: GENDER: MARITAL STATUS:
NATIONALITY: STATE OF ORIGIN: LGA:

QUALIFICATION DETAILS

SN	School Attended	From	To	Qualification Obtained	Remark

NEXT OF KIN: PHONE NO:
NAME OF SPONSOR: SPONSOR'S ADDRESS:
.....
SPONSOR'S PHONE NUMBER(S): EMAIL ADDRESS:
APPLICANT'S HOBBIES/ACTIVITIES:
Student's Signature: Date:

REFEREE DETAILS

Name:
Rank/Position/Title: Phone No:
Address:
Signature: Date:

Passport
Photograph

A letter of Attestation of character is to be attached to the form on submission.

FOR OFFICIAL USE ONLY

Applicant ID No:

Admission Status:

Reason not Admitted:

Admission Officer's Signature & Date:

Registrar's Signature & Date:

<p>.....</p> <p>Commandant's Signature & Date</p>
