

# BENUE STATE UNIVERSITY, MAKURDI

## ALUMNI BASIC INFORMATION FORM



### PERSONAL DETAILS

Title (Mr./Mrs./Miss./Dr./Prof./Chief/Engr./Alhaji/Others) [\_\_\_\_\_]

First Name: [\_\_\_\_\_] Middle Name: [\_\_\_\_\_]

Maiden Name: [\_\_\_\_\_] Surname: [\_\_\_\_\_]

Gender: Male [\_\_\_\_\_] Female [\_\_\_\_\_] Date of Birth: [\_\_\_\_\_] DD [\_\_\_\_\_] MM [\_\_\_\_\_] YY

Marital Status: Single [\_\_\_\_\_] Married [\_\_\_\_\_] Divorced [\_\_\_\_\_] Widow/Widower [\_\_\_\_\_]

### CONTACT DETAILS

Present Home Address [\_\_\_\_\_]

[\_\_\_\_\_]

Office Address [\_\_\_\_\_]

[\_\_\_\_\_]

[\_\_\_\_\_] City/Country [\_\_\_\_\_]

Postal Code [\_\_\_\_\_] E-mail [\_\_\_\_\_] Telephone [\_\_\_\_\_]

Occupation [\_\_\_\_\_] Place of Work [\_\_\_\_\_]

### ACADEMIC DETAILS

Year / Session [\_\_\_\_\_] Matriculation Number [\_\_\_\_\_]

Certificates Obtained at BSU with Dates [\_\_\_\_\_]

Department [\_\_\_\_\_] Faculty [\_\_\_\_\_]