



ROYAL COLLEGE OF HEALTH TECHNOLOGY

Mbieri-Ogwa, Umuahii Town Obi-Mbieri Autonomous Community
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**AFFIX
PASSPORT
PHOTO**

ADMISSION FORM FOR THE ACADEMIC SESSION

Note: Print out the Form in Coloured and Fill

PERSONAL DATA

NAME (Surname First):
DATE OF BIRTH:/...../..... GENDER: MARITAL STATUS:
NATIONALITY: STATE OF ORIGIN:
L.G.A OF ORIGIN:
HOME / POSTAL ADDRESS:
TELEPHONE (s):
E-MAIL:

COURSE OF STUDY

COMMUNITY HEALTH EXTENSION WORKER (CHEW) PUBLIC HEALTH DIRECT ENTRY
JUNIOR COMMUNITY HEALTH EXTENSION WORKER (JCHEW) ENVIRONMENTAL HEALTH
GERIATRICS / GERONTOLOGY

O'LEVEL EDUCATIONAL QUALIFICATION

SCHOOL ATTENDED:
QUALIFICATION OBTAINED: YEAR: SITTING:

REG NO:		REG NO:	
SUBJECT	GRADE	SUBJECT	GRADE

Have you attended any tertiary institution before? If yes where, when and why did you leave?
.....
.....

SPONSOR

NAME OF SPONSOR:
ADDRESS:
TEL: E-MAIL:

PAYMENT

Kindly make your payment of N10, 000 @ UBA. Acc Name: Royal College of Health Technology Sundries Acc No: 1021489274.
PAYMENT RECEIPT NO / SLIP ID:
PAYMENT NAME:
TEL:

Please attach the photocopy of the following: (O'level Result and payment teller / slip) and submit the form at the school Registrar.
Royal college of health Technology "health is wealth".