

COUNCIL OF LEGAL EDUCATION  
NIGERIAN LAW SCHOOL  
HEADQUARTERS  
BWARI – ABUJA



Affix Passport  
Photograph

OFFICE OF ALUMNI AND ADVANCEMENT  
ALUMNI REGISTRATION FORM  
PLEASE FILL IN CAPITAL LETTERS

TITLE: PROF/DR/MR/MRS/MISS/OTHERS .....

FULL NAME .....  
SURNAME FIRST NAME OTHER NAMES

FULL NAME (AT LAW SCHOOL).....  
SURNAME FIRST NAME OTHER NAMES

GENDER .....DATE OF BIRTH.....

YEAR OF ADMISSION TO THE LAW SCHOOL .....

CAMPUS ATTENDED.....REG. NO .....

ALUMNI ASSOCIATION SET .....

NAMES & TELEPHONE NUMBERS OF EXECUTIVES OF YOUR SET: .....

.....  
PLEASE CONTINUE OVERLEAF

CURRENT RESIDENTIAL ADDRESS .....

.....

CURRENT OFFICE ADDRESS.....

.....

DESIGNATION .....PHONE NUMBER(S).....

EMAIL ADDRESS(ES).....

YEAR OF CALL TO THE NIGERIAN BAR..... S.C. ENROLMENT NO.....

HAVE YOU PAID YOUR ALUMNI FEE?.....

IF YES, DATE (ATTACH COPY OF RECEIPT/RR).....

IF NO, PLS MAKE PAYMENT OF ₦10,000 TO THE COUNCIL OF LEGAL EDUCATION REMITA PLATFORM  
(ATTACH COPY OF RECEIPT/RRR)

NAME AND TELEPHONE NUMBERS OF OTHER ALUMNI YOU KNOW.....

.....

.....  
PLEASE CONTINUE OVERLEAF

SUGGESTIONS ON HOW TO SERVE YOU BETTER .....

.....

.....  
PLEASE CONTINUE OVERLEAF

SIGNATURE:.....DATE:.....

CHOOSE 50TH ANNIVERSARY CELEBRATION