

UNIVERSITY OF ILORIN, ILORIN, NIGERIA

OFFICE OF THE REGISTRAR



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File No:

ADDITIONAL INFORMATION FOR OBTAINING A LETTER OF INTRODUCTION

1. Title (e.g. Prof./Dr./Mr./Mrs./Miss):
2. Surname:
3. Other Names (in full):
4. Department/Unit:
5. Faculty:
6. Date of First Appointment:
7. Position on First Appointment:
8. Present Position:
9. GSM No:
10. Current Position(s) held (e.g. Dean, HOD, etc):
.....
11. Former Position(s) held:
12. Address of Embassy (Lagos/Abuja)
.....
13. Purpose: (e.g. Visit, Conference/Seminar/Workshop):
.....
14. Title(s) of Paper to be presented:
.....
.....
15. Signature: Date: