AFRICAN METHODIST EPISCOPAL UNIVERSITY
34 Camp Johnson Road
Monrovia, Liberia

ENTRANCE & PLACEMENT EXAMINATIONS FORM

_________________________  Gender: [ ] Male  [ ] Female
MM  DD  YY

Name: ____________________________________________________________________________________
LAST NAME   FIRST NAME     MIDDLE
Date of Birth: _______________  Place of Birth: ________________________________
MM  DD  YY

County of Origin: _____________________________  Country of Origin: __________________________

Previous School Attended: ____________________________________________________________________
Please respond in a complete statement

School Address: _____________________________________________________________________________

Are you currently attending college? □ Yes  □ no  Previous Qualification: _______________________

Parents' name: _____________________________________________________________________________

Address: ___________________________________________________________________________________

Cell Nos: ____________________________________________  Email: _________________________________

Major (tick one)
- Accounting  □
- Economics  □
- English  □
- Mass Communication  □
- Management  □
- Political Science  □
- Public Administration  □
- Religious Education  □
- Sociology  □
- Theology  □

Major (tick one)
- Pastoral Counseling  □
- Christian Family Cnslg.  □
- School Counseling  □
- Early Childhood Edu.  □
- Language Arts  □
- Social Studies  □
- Mathematics  □
- Science  □
- Chemistry  □
- Physics  □
- History  □

Minor (tick one)
- Accounting  □
- Economics  □
- English  □
- Mass Communication  □
- Management  □
- Political Science  □
- Public Administration  □
- Christian Education  □
- Sociology  □
- Theology  □
- Social Work  □

DON NOT WRITE BELOW THIS LINE

Examination Number: _______________  Receipt No: _______________
Bank Deposit Slip No: _______________  Exams Room No: ____________

...pursuits of Excellence