

COLLEGE APPLICATION FORM

STUDENT INFORMATION

NAME (FIRST/LAST):			
AGE:	SEX: Male <input type="checkbox"/> Female <input type="checkbox"/>	DATE OF BIRTH:	
PLACE OF BIRTH:		NATIONALITY:	
CHILD'S DOCTOR:		PHONE NUMBER:	
RELIGION:			
ANY RELEVANT MEDICAL INFORMATION (Allergies, etc):			
CLASS / YEAR FOR ADMISSION			
LAST SCHOOL ATTENDED:		LAST CLASS:	
PLS TICK APPROPRIATELY:			
FACILITY REQUIRED:			
DAY: <input type="checkbox"/>		BOARDING: <input type="checkbox"/>	

PARENTS' INFORMATION:		FATHER:	MOTHER:
NAME (FIRST/LAST):			
HOME ADDRESS:			
HOME PHONE NO:			
PROFESSION:			
OFFICE ADDRESS:			
E-MAIL:			
OFFICE PHONE NO:			
MOBILE NUMBERS:			

TERMS AND CONDITIONS

I accept the terms and conditions of the Management as given in the School Prospectus, Application Form, Fees Schedule and Terms of Enrolment. I understand and agree to pay each school fees by the last day of each term and that a written notice to be given before withdrawing my child from the school or payment of a term's fees in lieu of notice.

Please submit with this form:

- Copy of birth certificate
- 4 recent passport photographs

.....
Parent's Signature & Date

TERMS AND CONDITIONS

EXAMINATIONS TAKEN:	SAT: <input type="checkbox"/>	OTHER EXAMS TAKEN:
	END OF YEAR 6: <input type="checkbox"/>	1.
	COMMON ENTERANCE: <input type="checkbox"/>	2.

PLEASE AFFIX
 PHOTOGRAPH

APPLICATION FORM

PUPIL INFORMATION

Surname *

Firstname*

Middlename*

Date of Birth*

Gender*

Class/Year of Entry

Boarding: * *(Please tick the appropriately)*

Yes

No

Home Address *

Address Line 2 City/State/Country*

Last School Attended *

Class*

Nationality*

Any Special Need(s) *

FATHER INFORMATION

Father's Name (In Full) *

Occupation*

Nationality*

Home Address *

Address Line 2 City/State/Country*

Telephone*

GSM (Mobile)*

Office Address *

Office Address Line 2 City/State/Country*

Telephone *

Father's Email Address*

Religion*

MOTHER INFORMATION

Mother's Name (In Full) *

Occupation*

Nationality*

Home Address *

Address Line 2 City/State/Country*

