

Our Ref. _____ Your Ref. _____

APPLICATION FORM

Class Applied For _____

STUDENT INFORMATION

Surname _____ Other Names _____

Religion _____ Age _____ Gender _____

Nationality _____ Date of Birth _____

PHYSICAL HOME ADDRESS

Village _____ County _____

District _____

ACADEMIC BACKGROUND (FOR PRIMARY PUPILS)

Former School(s) attended i. _____

ii. _____

Grades obtained

Literacy I _____ Literacy II _____

Maths _____ English _____ Science _____ SST _____

Any special talents (please specify) _____

CONTACT INFORMATION

	Father	Mother
Name	_____	_____
Occupation	_____	_____
Contact Address	_____	_____
Mobile Number	_____	_____
Email address	_____	_____

Any other contact in case of an emergency

Name _____ Doctor _____

Relationship to child _____ Clinic/Hospital _____

Mobile Number _____ Mobile Number _____

Attach the following

- 3 passport size photos of the child
- 1 passport size photo of each guardian
- Report card from previous school (Most Recent)
- Birth Certificate
- Immunisation Card