

Affix recent Passport size Photograph here

STUDENT APPLICATION AND ADMISSION FORM

Read the instructions carefully and complete in Capital/Block letters

Student Information						
Name of student						
(Surname/middle/ first)						
Class applied for				Adm No.		
Previous School		Grade:				
Date of birth (D/M/Y)		Height (m)				
Place of birth		Height (III)				
	Citizenship Smooial talanti					
Religion	Special talent:					
Details of the parent/gu	ardian (state relationship if g	guar	alan)			
Name			ID/Passport No.			
Hse No.	Street		Estate			
Town	County		P O Box			
HomeTel	Parent Mobile		Email			
Occupation	Employer's or Business Nam		Address:			
Occupation	Employer 5 of Business (vain		riddiess.			
Additional (next of kin)) contact in case of emergency	v				
Name: -	, 00220000 222 00000 02 022002 902203	,				
Relationship	Mobile		Other p	ohone		
1	-					
Medical information						
Ensure this is accurate an	nd should be confirmed by a me	edica	al officer.	If the answer to any of the		
	attach details and your Doctor'					
Does the student suffer from an existing medical condition?						
Is the student on any medication, or require regular medication						
Does the student have any medical limitations on participation in any						
school activities?						
Does the student suffer from any allergies (food types, medicine, etc)						
	mation that the school should kn					
respond to an emergency		**				
Details of any Medical C						
Family Doctors				Tel.		
Name						
	gency, if the school is unable t	to red	ach the no	rent, guardian, next of		
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In case of medical emergency, if the school is unable to reach the parent, guardian, next of kin, or Doctor provided herein, the parent hereby authorises the Principal to take any action that he considers in the best interest of the student in the particular circumstances.

Financial information									
Will the fees and other payments due be made by Parent/Guardian or sponsor? If sponsor,									
kindly signify below your undertaking to pay the fees due:									
Sponsor's name		<i>ccy</i>		Contact:					
Address				osition:					
Telephone		Signature:							
Any limitations on sponsorship									
Terms and conditions in respect of finances									
 A deposit is payable to secure admission, and if the place is not taken up, upto 10% of the annual fees will be forfeited. Fees shall be paid in full, and in advance of each term, to cover specific costs. Where fees due are not paid, a surcharge may be imposed, which shall be payable. Once paid, fees will not be refunded due to absence of the student from school for whatever reason Whenever a student is withdrawn from the school, without at least one term's notice, the fees in respect of the term not attended will be due and payable. The school will not be responsible for the safety of personal finances in the person of the student. Such cash, and any items of value, should be deposited with the office for safe custody. 									
I/We confirm that I/we have read and understood, and fully agree to be bound by these terms and conditions.									
Name:	Sign		d		Date				
Witness:		Signed			Date				
Attachments Checklist Please ensure you have attached copies of the following:									
Document to be att	Document to be attched:		Confirmed	Revie	Reviewed by School				
Birth certificate									
School leaving certificate									
Results certificate (Exam or previous school)									
Medical Examination Certificate (and additional									
information if appl									
Copy of Parent's/C	Suardian's/Sponsor's ID	card							
Other:		-							