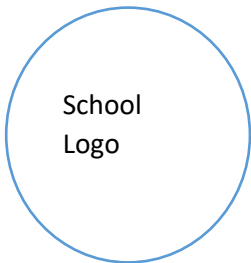


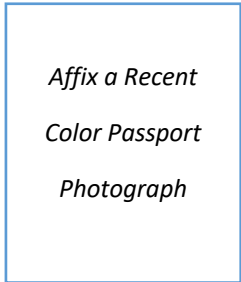
**Admission Application Form**

**LABONE SDA CHURCH SCHOOLS**

**ADMISSION FORM - *Serial Number(to be computer generated)***



School  
Logo



*Affix a Recent  
Color Passport  
Photograph*

**Requirements:**

- a. Complete Form in **BLOCK CAPITALS**
- b. Do Not Use Abbreviations
- c. Attach Photocopies of Birth certificate / Weighing Card
- d. Provide Cumulative Academic Record of Applicants from Class 2 to JHS 2

**A. Personal Details of Applicant:**

Surname:.....

.....

Middle

Name:.....

First Name:

.....

Date of Birth: dd.....mm

.....yy.....

Place of Birth:

.....

Nationality:

.....

**A. Gender:** Female:      Male:      (*Tick one*)

**B. Schools Attended:**

	Name of School	Town	Level
1	.....	.....	.....
2	.....	.....	.....
3	.....	.....	.....

**C. Class Applying For :( *Tick one*)**

Crèche      Nursery      Kindergarten      (*Tick one*)

Primary: Class 1   2   3   4   5   6   JHS 1 2 3 (*Tick one*)

**D. Does your ward have a Medical Condition?** No   Yes   (*Tick one*)

If yes, provide a Medical Report obtained from a recognized Medical Institution

**E. Particulars of Father:**

Name.....

Occupation: .....

Residential Address: .....

Postal Address: .....

Nationality: .....

Mobile Contact(s) .....

E- mail Address: .....

**F. Particulars of Mother:**

Name.....

Occupation: .....

**Page 1 of 2**

Residential Address: .....

Postal Address: .....

Nationality: .....

Mobile Contact(s) .....

E- mail Address: .....

**G. Who pays Applicant’s school fees:**

Name:.....

Occupation:.....

Relationship to the Applicant:...

Residential Address: .....

Postal Address: .....

Nationality: .....

Mobile Contact(s) .....

E- mail Address: .....

**H. Particulars of other wards you have in our Schools**

	Names	Relationship	Current Class
1	.....	.....	.....
2	.....	.....	.....
3	.....	.....	.....
4	.....	.....	.....

**I. Declaration of Parent / Guardian. I am aware of the following rules which I will assist my ward to observe when this admission application is accepted:**

- i. My ward may be required to take a test at a cost, the result of which shall influence this admission process.
- ii. My ward’s admission could be revoked for any false declaration in this application.

**Signature of Parent / Guardian**..... **Date**.....

**J. For Official Use Only**

**Secretary 1. Check list: Tick to indicate inspection and acceptance**

- i. Payment for this form. Form Serial number .....Date..... Receipt number.....(to be done by the Cashier)before the release of the form to the messenger, parent / guardian.
- ii. Birth Certificate or Weighing Card
- iii. Photographs provided
- iv. Cumulated report
- v. Form duly completed and signed by parent / guardian.
- vi. A folder has been created and labeled accordingly – Student Identification number, class copy of completed Admission Form and Letter included.

vii. Admission Register completed

Signature..... and Date ..... **Secretary**

**2. Endorsement to confirm admission process is complete and regular.**

**Headmaster or Assistant Headmaster Signature..... and Date .....**

**3. Process vetted and passed**

Signature..... and Date ..... **Internal Auditor**

**4. Documents stored and secured for future reference.**

Signature..... and Date..... **Secretary Page 2 of 2**

Responses to Enquiries
Sale of Admission Forms
Receipt of Completed Admission Forms
Entrance Exam
Release of Results of Entrance Exams
↓
Issue of Formal Admission Letter
↓
Issue of Acceptance Letter
Generate Student Id Number
Complete Admission Register
Send Details to Accounts
↓
Prepare and send Bill of Fees
Collect Fees / Issue Receipts
Issue Clearance/ Cards/Tags
Audit Clearance
↓
Records Management
Supply/Uniforms/Exercise/Textbooks
↓
Orientation
↓
Start Classes

**Admission Flow Chart**

**Application for Withdrawal of Pupil / Student Form**

**A. Particulars of Applicant:**

i	Full Names of Pupil/ Student
ii	Student Identity / Accounts Number
iii	Full Names of Parent / Guardian
iv	Date Admitted
v	Current Class and Term
vi	Name of Class Teacher
vii	Current Tuition and other Charges Outstanding

viii	Reason(s) for the withdrawal
viv	Duration / proposed date of resumption
x	School Properties in his / her possession
xi	School Properties returned
xii	Condition of School Properties Returned

**B. Conditions**

- i. A written application is required.
- ii. This form shall be completed in duplicate for each child.
- iii. All outstanding fees shall be settled.

Signature .....and .....Date

**Parent/ Guardian**

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**For Official Use:**

Current Class admitted to.....  
 Current Year And Term.....  
 Current Tuition and other Charges Outstanding .....

**C. Approved by:**

..... Signature of .....Date

**Headmaster.**

**Application for Re-Admission of Withdrawn Pupil/ Student**

i	Full Names of Pupil/ Student
ii	Student Identity / Accounts Number
iii	Full Names of Parent / Guardian
iv	Date Withdrawn
v	Last Class / Form
vi	Year Term
vii	Reason(s) for the withdrawal

**B. Conditions**

- iv. A written application is required.
- v. This form shall be completed in duplicate.
- vi. All outstanding fees shall be settled.
- vii. Re- admission fees at the current rate shall be payable on readmission.
- viii. Previous Identity and Accounts numbers shall be maintained.
- ix. The School have a discretion to repeat, promote or conduct a re-entry examination.
- x. Exemption could be granted depending on the duration and purpose of the absence.

Signature .....and .....Date

**Parent/ Guardian**

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**For Official Use:**

Exemptions granted.....

Class admitted to.....

Current Tuition and other Charges Outstanding .....

Fees Payable.....

**D. Approved by:**

Signature .....and .....Date

**Headmaster.**