



Please affix 1
passport-sized
photograph here

APPLICATION FORM FOR 2019/2020 ADMISSION

CLASS APPLIED FOR

APPLICATION SUBMITTED DD/MM/20YY

PUPIL DETAILS

Name as written on International Passport

SURNAME

FIRST NAME(S)

ANY OTHER NAMES (NICKNAMES OR FORMER NAMES)

MALE FEMALE

DATE OF BIRTH DD/MM/20YY

PLACE OF BIRTH

1ST NATIONALITY

2ND NATIONALITY

LANGUAGES SPOKEN

RELIGION

STATE OF ORIGIN

LOCAL GOVERNMENT AREA

PREVIOUS SCHOOL ATTENDED

DOES THE APPLICANT HAVE ANY SPECIAL EDUCATIONAL NEEDS OR MEDICAL CONDITIONS?

FAMILY INFORMATION

HOME ADDRESS

PARENTS EMAIL ADDRESS

MOTHER'S CONTACT NUMBER

FATHER'S CONTACT NUMBER

PLEASE ATTACH THE FOLLOWING:

Passport photograph

Photocopy of international passport

Photocopy of birth certificate

Photocopy of last school report

REFERENCES

HEAD TEACHER'S NAME

HEAD TEACHER'S CONTACT NUMBER

HEAD TEACHER'S EMAIL

HOW DID YOU HEAR OF START-RITE SCHOOLS?

Word of Mouth Website Social Media Radio TV Friends

Other (please specify)