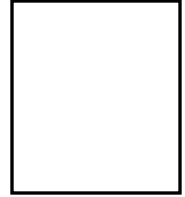

APPLICATION FORM

GREENWOOD HOUSE SCHOOL



FULL NAME OF CHILD _____

(Surname in capital letters)

NAME BY WHICH CHILD IS KNOWN _____

DATE OF BIRTH _____

(Attach a copy of birth certificate)

RELIGION _____

NAME OF FATHER/ GUARDIAN _____

OCCUPATION _____

BUSINESS NAME AND ADDRESS _____

PHONE NO _____

NAME OF MOTHER _____

OCCUPATION _____

BUSINESS NAME AND ADDRESS OF WHERE TO BE CONTACTED DURING THE DAY

PHONE NO _____

FULL RESIDENTIAL ADDRESS _____

PHONE NO _____

NATIONALITY OF FATHER _____

NATIONALITY OF MOTHER _____

NATIONALITY OF CHILD _____

NIGERIAN STATE OF ORIGIN _____

DOES CHILD WEAR GLASSES? _____

CONTACT LENSES _____

ANY PHYSICAL DEFECTS OF CHILD _____

(E.G SICKLE CELL ANAEMIA ALLERGIES)

ANY OTHER RELEVANT INFORMATION? _____

PARENTS/GUARDIAN SIGNATURE
DATE

OFFICIAL USE ONLY

REGISTRATION NO. _____

REGISTRATION FEE PAID \$ _____ DATE _____

INTERVIEW TEST DATE AND TIME _____

RESULT _____

PLACE OFFERED _____ ACCEPTED _____