ALMOND COLLEGE

8/10, Betty Udokwe Close , Graceland Estate, Lekki-Epe Expressway, Lagos, Nigeria
Tel: 08158111000 | 08056046060
Website: www.almondcollege.com **Email:** collegealmond@gmail.com | info@almondcollege.com

Affix passport photo here

SECONDARY SCHOOL APPLICATION FORM

1. STUDENT'S PERSONAL INFORMATION

Surname (in capital letters):

First Name: Middle Name:

State of Origin: L.G.A:

Country of Birth: Date of Birth: dd / mm / yyyy

Language(s) spoken:

Current Home Address:

Email Address: Mobile No:

Boarding ☐ Day ☐
(Please tick as appropriate)

2. DETAILS OF PARENT/GUARDIAN

Name:

Relationship to Student: Occupation:

Current Home Address:

Mobile No:

Office Address:

Office Telephone: Fax:

Email Address:

3. DETAILS OF PARENT/GUARDIAN

Name:

Relationship to Student: Occupation:

Current Home Address:

Mobile No:

Office Address:

Office Telephone: Fax:

Email Address:

4. APPLICANT LIVES WITH *(Please tick as appropriate)*

Both Parents ☐ Father Only ☐
Mother Only ☐ Relations ☐
Friends ☐

5. EDUCATIONAL BACKGROUND

S/N	Previous Schools Attended	From	To

Class on Admission: Expected Date of Entry:

6. MEDICAL INFORMATION *(Attach Medical Report)*

Do you have any medical condition or allergy?
Yes ☐ No ☐

Please give details of any medical conditions or allergies that require our attention or notification and any prescribed medicine(s) taken on a regular basis.

1.
2.

7. ADMISSION PROCEDURE

Purchase and return completed application form with:
(a) Two (2) passport photograph
(b) Last School Report
(c) Photocopy of birth certificate
(d) Medical Report

8. REFERRAL *(Please tick appropriate box)*

How did you hear about ALMOND COLLEGE

Email ☐ Media ☐
Exhibitions ☐ Referrals ☐
Almond Website ☐ Tele-Marketing ☐
School/Church Visit ☐ Flyers/Banners ☐

9. DECLARATION BY PARENT(S) / SPONSOR (S)

I / We, the undersigned, request and authorize the exchange of information between Almond College and my child's ward's former school.

I / We, declare that the information provided herein is true and that I / We will provide the needed documents for processing the application. Furthermore, I/We agree that Almond College.

(I) Reserves the right to reject any application that contains inaccurate, incomplete or false information and

(ii) Reserves the right to reject any application that requires special needs that she cannot meet.

Name of Parent _____ Signature & Date _____

Name of Parent _____ Signature & Date _____

10. DECLARATION BY STUDENT

I undertake to be of good behaviour and obey all rules and regulations as stated in the student's guidelines / terms and conditions of the school.

Name of Parent _____ Signature & Date _____

11. CHECKLIST *(Have you:)*

Y	N	*Please tick appropriately*
☐	☐	**Completed all sections of the application form?**
☐	☐	**Attached a copy of your last result?**
☐	☐	**Attached a copy of your birth certificate?**
☐	☐	**Attached a medical report?**
☐	☐	**Attached two recent passport photographs?**
☐	☐	
☐	☐	

12. FOR OFFICIAL USE ONLY

Admission Status
Conditions
Entrance Exam Score:
Interview Date:
Birth Certificate:
Medical Report:
Receipt No:
Admission Officer(s):

ACCEPT	COURSE	BOARDING/DAY	COMMENT