



GOLDEN GOOD SHEPHERD SCHOOLS

Plot A 21 Gbazango West, Kubwa II Arab Road Abuja.
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info@goldengoodsshepherdschool.com
Motto: Seat Of Academy, Morals and Discipline
Tel: 0803 700 2881, 0818 367 4899

ADMISSION FORM FOR SECONDARY

Name of Student: _____

Date of Birth: _____

Place of Birth: _____

(Attach photocopy of birth certificate)

Residential Address: _____

State of Origin: _____

Name of Father: _____

Name of Mother: _____

Occupation of Father: _____

Occupation of Mother: _____

Phone no. Of father/E-mail Address: _____

Phone no. Of Mother/E-mail Address: _____

Whatsapp No. _____

Have all Immunization been Completed Yes ☐ No ☐

(If yes attach photocopy of Immunization Certificate)

Class into which admission is sought: _____

The name of child's former school: _____

(If yes attach photocopy of child progress report of previous school)

REASONS FOR LEAVING THE PREVIOUS SCHOOL

Please notify the school in case of change of address/Phone Number:

SECTION B: (OFFICE USE ONLY)

ADMISSION NO: _____

PLACEMENT TEST SCORE: _____

CLASS ADMITTED INTO: _____

(Thank you for choosing Golden Good Shepherd Schools)