

BIODATA PAGE

SURNAME	
OTHER NAMES	
DATE OF BIRTH	
PLACE OF BIRTH (City, State, Country)	
SEX	
NATIONALITY	
CAREER	
FATHER'S NAME	
MOTHER'S NAME (maiden name)	
HOME TOWN	
LOCAL GOVERNMENT AREA	
STATE OF ORIGIN	
PERMANENT HOME ADDRESS	
EDUCATIONAL INSTITUTIONS ATTENDED WITH DATES	
ACADEMIC QUALIFICATION	
HOBBIES	
PHONE NUMBERS	
E-MAIL ADDRESS	
CURRENT CONTACT ADDRESS	

Address: 8 School Road, Ikwerre ngwo etch, Rivers State, Nigeria. E-mail: showersedu@gmail.com. Tel no.: 08022240735 or 08033386809



SHOWERS CHRISTIAN HIGH SCHOOL

Address: 8 School Road, Ikwerre ngwo etch, Rivers State, Nigeria. E-mail: showersedu@gmail.com. Tel no.: 08022240735 or 08033386809

CHECKLIST

All parents are required to submit the following for administration purposes (*please tick if you have included it*):

- ☐ 1. A Filled Acceptance form
- ☐ 2. Filled application form (if applicable)
- ☐ 3. A filled Medical Form by parents
- ☐ 4. A Medical Report from a doctor
- ☐ 5. A copy of their ward(s) birth certificate
- ☐ 6. 2 Passport Photographs
- ☐ 7. A copy of their ward(s) International Passport
- ☐ 8. WAEC/NECO/CIE/JSCE result (for Continuing Students)
- ☐ 9. A transcript from previous Secondary School (for continuing Students)
- ☐ 10. All Hostel required items



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ACCEPTANCE FORM

I (*child's name*) accept/reject my offer of admission into

Creche, Nursery, Primary, JSS 1, JSS 2, SS1, SS2 or O'Level, A'Level program (*underline the class*) at Showers

Christian High School. I shall uphold to the rules and regulations, values of the School. All my fees will be duly paid

by (*name of parent or guardian*).

Signature of Ward

Signature of Parents

Date:



SHOWERS CHRISTIAN HIGH SCHOOL

APPLICATION FOR ADMISSION



Student Information

Last Name: _____ First Name: _____ Middle Initial: _____
Birthday: ____/____/____ Age: _____ Sex: ____
Race: _____ Student Email Address: _____
Student is applying for what class _____ DESIRED FUTURE CAREER.....

Family Information

Father's Last Name: _____ First Name: _____
Street Address: _____ Home Phone: _____
City: _____ State: _____
Place of Employment: _____ Position: _____ Wk. Phone: _____ Ext. _____
Financially Responsible? ____Yes ____No Father's Email Address _____ Cell Phone: _____
Work Hours from _____ to _____.

Mother's Last Name: _____ First Name: _____
Street Address: _____ Home Phone: _____
City: _____ State: _____
Place of Employment: _____ Position: _____ Wk. Phone: _____
Ext. _____
Financially Responsible? ____Yes ____No Mother's Email Address _____ Cell Phone: _____
Work Hours from _____ to _____.

Parents' Marital Status: ☐ Married ☐ Divorced ☐ Separated ☐ Single Parent ☐ Widow ☐ Widower
Parent Committed to Christ: ☐ Father ☐ Mother

Any unusual factor in the student's life: Absence of father or mother, unusual accidents or serious illness, physical handicap, learning difficulties, etc. _____

-Family Info. Continued-

Names and ages of other children in family:

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____

Admission Information

Student is applying for what class? _____ (If applying for J S S 1, student **must** be 10 years from July.)

Child's Current School: _____ Phone: _____

Address: _____

Street

City

State

Reason for leaving current school: _____

Have all financial obligations been fulfilled at the school listed above? ☐ Yes ☐ - No

Has any class been repeated? _____ If yes, which one: _____ Reason: _____

Does the applicant exhibit any kind of rebellious attitudes toward parents or others in authority? ☐ Yes ☐ No

Why do you wish this child to attend Showers International Christian High Schools?

Does student plan to participate in after-school sports? ☐ Yes ☐ No

STUDENTS 10 YEARS OLD AND ABOVE: Please describe in your own words how you received Jesus as your personal Lord and Savior. Also include when and where this happened. _____

Confidential

- ☐ Yes ☐ No Has the applicant ever used illegal or dangerous drugs?
- ☐ Yes ☐ No Has the applicant ever used alcoholic beverages or tobacco?
- ☐ Yes ☐ No Has the applicant ever been expelled, dropped, or suspended by any school?
- ☐ Yes ☐ No Does the applicant have any physical, emotional, or mental handicaps which may affect activities or progress?
If so, explain: _____
- ☐ Yes ☐ No Has the applicant received any type of tutoring or therapy? If so, explain: _____

If any answer is affirmative, and there is not enough space to explain, please give complete details on a separate sheet of paper.

OUR AGREEMENT TOGETHER

We agree to uphold and support the high academic standards of the school by providing a place at home for our child to study and by giving our child encouragement in the completion of homework and assignments.

We recognize that for our child to make good progress in his work, it is essential that he have confidence in his teacher and the school. Therefore, we will do all in our power to see that our child respects and obeys the school staff and standards.

We agree to read the Parent/Student Handbook and will endeavor to support and uphold the principles, practices, and educational policies of the school in every way.

This statement of cooperation will be in effect for as long as my children attend City Christian Schools.

PARENTAL COMMITMENT:

1. We understand that our failure to report psychiatric counseling, any prescribed program of medication or involvement with juvenile authorities during the past three years may be cause for immediate withdrawal.
2. We hereby invest authority in the school to discipline our child when necessary. We further agree that we will cooperate and discipline our child in the home as needed. (Prov. 13:24)
3. We agree that if our child should become involved in any trouble with children in the school we will, in love of Christ and with prayer, register only necessary complaints with the teacher or administrator.
4. We understand that assessments will be made to cover damages to school property for which our child is responsible (including breakage of windows and abuse of other personal property).
5. We understand that the school reserves the right to dismiss any student who does not:
(a) respect and observe spiritual and/or behavioral standards and (b) cooperate in our educational goals.
6. We give permission for our child to take part in all school activities, including sports and school-sponsored trips away from the school premises, and absolve the school from liability to us or our child because of any injury to our child at school or during any school activity.
7. I understand that my child's photo, writings, art work, or achievements could be used in CCS promotional material.

BOTH PARENTS' SIGNATURES REQUIRED (when applicable)

Date _____

Signature (Mother's) _____ Signature (Father's) _____