

Hajj Camp Road Adjacent Ilorin West LGA Secretariat Aleniboro- Ilorin, Kwara State. www.silvermapleschoolilorin.com info@silvermapleschoolilorin.com 09016145353, 09017912318

# <u>APPLICATION FOR ADMISSION</u> Please complete each section in <u>BLOCK LETTERS</u>

## Section 1: CHILD'S PERSONAL DETAILS

| Name  |  |  |     | Father's Name     |      |       |        |   |
|---|--|--|-----|-------------------|------|-------|--------|---|
| Date of Birth   |  |  |     | Place of Birth    |      |       |        |   |
| Nationality   |  |  | Mal |                   | Male | F     | Female |   |
| Address   |  |  |     |                   |      | · · · |        | · |
| Religion  |  |  |     | State o<br>Origin |      |       |        |   |
|   |  |  |     | LGA               |      |       |        |   |
| Name and classes of any brother(s)/sister(s) already attending the school |  |  |     |                   |      |       |        |   |
|   |  |  |     |                   |      |       |        |   |
| Language(s) commonly spoken at home: (1): (2):                            |  |  |     |                   |      |       |        |   |
|   |  |  |     |                   |      |       |        |   |
| Section 2: ACADEMIC DETAILS   |  |  |     |                   |      |       |        |   |
| Class in which admission is sought:                                       |  |  |     |                   |      |       |        |   |
|   |  |  |     |                   |      |       |        |   |
|   |  |  |     |                   |      |       |        |   |

| Name(s) of school(s | ) attended in the | past and dates | of attendance: |
|---------------------|-------------------|----------------|----------------|
|---------------------|-------------------|----------------|----------------|

| Name of School (Any City/Country) | _ | Class | From |   | То |
|-----------------------------------|---|-------|------|---|----|
|                                   |   |       |      |   |    |
|                                   | 1 |       |      |   |    |
|                                   |   |       |      |   |    |
|                                   | - |       |      | 1 |    |
|                                   |   |       |      |   |    |
|                                   | 1 |       |      | ĺ |    |
|                                   |   |       |      |   |    |

### Section 3: PERSONALITY AND HEALTH

Please provide details of any special aspects of your child's personality:

Please provide information if your child has any allergy or health problem requiring special attention:

### Section 4: PARENT / GUARDIAN DATA

| Father's Name    |             |
|------------------|-------------|
| Profession       | Designation |
| Organization     |             |
| Office Address   |             |
| Office Telephone | Fax No:     |
| Email:           |             |
|                  |             |
|                  |             |

| Mother's Name       |   |         |  |
|---------------------|---|---------|--|
| Mathar's Occupation |   | •       |  |
| Mother's Occupation | n |         |  |
| Organization        |   |         |  |
| Office Address      |   |         |  |
| Personal            |   |         |  |
|                     |   |         |  |
| Telephone           |   |         |  |
| Office Telephone    |   |         |  |
| Email:              |   | Fax No: |  |

#### **Section 5: DECLARATION**

I confirm that, to the best of my knowledge, the information provided in this form is correct. I have understood and agree to abide by all school rules including school discipline, inter-school/city transfers and tuition fee payment and refunds. I also acknowledge that while the school does its best to ensure the safety of each child's life, health and property, the school cannot be held responsible for any damage to these.

Signature of Parent/ Guardian

Date

Signatory's Name: \_

Signatory's Relation with the Child: \_\_\_\_\_\_

#### Section 6: ADMISSION PROCEDURE

- **1.** The completed admission form along with the copies of birth and health certificates, **3** passport size photographs and the registration fee (non-refundable) must be submitted to the school office.
- 2. After the admission from has been processed, a date is given for applicant's assessment.
- 3. Parents are informed of the outcome within 24 hours of the written test date. If a place is offered, the child's admission / enrolment must be confirmed and all dues paid within 3 days of date of offer.
- 4. If, within three days, enrolment is not confirmed, the child's place is offered to another candidate.

| FOR C                          | DFFICE      | USE ONLY                     |
|--------------------------------|-------------|------------------------------|
| Form Check By                  |             | Registration Fee Paid On:    |
| Birth Certificate Provided     | Yes:        | Payment                      |
| Photograph Provided            | Yes:        | Allergies?                   |
| Medical Certificate of fitness | Yes:        | Admission Fee:               |
| Written Test                   | Pass: Fail: | Tuition Fee:                 |
| Date:                          |             | Security Deposit             |
| Child Interviewed By:          |             | Total Payment                |
| Parent Interviewed By:         |             |                              |
| Acceptance / Rejection         | A 🗌 R 🗌     | Signature of School Admin    |
| Reason For rejection:          |             | Signature of School Aumin    |
|                                |             | Signatures of Head of School |
|                                |             |                              |