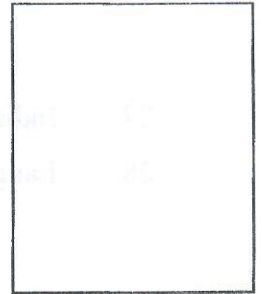


SAP'S SCHOOL
COMMITTED TO EXCELLENCE

FOR OFFICIAL USE



Date	Class	Comments

APPLICATION FOR ADMISSION

1. Surname :
2. First Names :
3. Date of Birth: 4. Place of Birth
5. Nationality: 6. Sex:
7. Religion : 8. Denomination
9. Residential Address
10. Postal Address
11. Home Tel:.....
12. Father's / Guardian's full name
13. Occupation
14. Business Tel: 15. Mobile
16. Father's E-mail Address
17. Mother's / Guardian's full name
18. Occupation
19. Business Tel: 20. Mobile
21. Mother's E-mail Address
22. Emergency Contact 23. Mobile
24. Pupil lives with (tick) both parents mother father guardian
25. Do you have children currently attending Sap's School?
26. If yes, indicate names and classes

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To Provide Quality Basic Education in a Secure, Spacious and God Fearing Environment.

27. Indicate class enrolling for
28. Language(s) spoken at home

PREVIOUS SCHOOLS ATTENDED

Name of School	Address	From	To	Last Class Completed

Has your child ever been expelled or refused entry to an educational institution?

If yes, give details

(Please inform the school office whenever there are changes in the above information)

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