



JOFEKAN INTERNATIONAL SCHOOL

20, Jofegan Street, Gbazhi
P.O.Box 1554, Bida, Niger State
Tel: 09067994941, 09051549704

Website: www.jofeganintschool.com, E-mail: jofeganintschool@yahoo.com

APPLICATION/ADMISSION FORM

PASSPORT
PHOTOGRAPH

Name: _____
(surname first)

Sex: _____ Age: _____ Date of Birth: _____

Nationality: _____ State: _____ L.G.A: _____

Contact Address: _____

School Last Attended: _____

Class in Last School Attended: _____ Reason for Leaving: _____

Name & Address of Parent/Guardian: _____

Tel No: _____ GSM: _____ E-mail: _____

Profession of Parent: _____ Place of Work: _____

Medical History; Blood GP: _____ Genotype: _____ Immunization: _____

Allergy: _____ Hospitalization: _____ Past illness: _____

Medication taken regularly: _____

Date:

Applicants Signature

Declaration by Parent/Guardian

I hereby declare that the information given above is correct. I also have no objection to my ward attending Jofegan International School, Bida

Date

Parent/Guardian Signature

NB: Attach the photocopy of the child's birth certificate.

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(for official Use)

Application Approved/Not Approved: _____

Admission No: _____

Head Teacher's Signature/Date

Proprietor's Signature/Date