

RELICS KIDDIES SCHOOL

Address: Off Olukoko Road, General, Ogbomoso, Oyo State.

Phone: 07088410260

relicskiddies@gmail.com



ADMISSION FORM

Term: _____ Year: _____ Class: Creche ☐ Prep. Special ☐ Prep. ☐ Basic ☐

SECTION A (PUPIL'S INFORMATION) Form N0: _____

NAME: _____

RESIDENTIAL ADDRESS: _____

DATE OF BIRTH: _____ SEX: _____ RELIGION: _____

GENOTYPE: _____ BLOOD GROUP: _____ NATIONALITY: _____

STATE OF ORIGIN: _____ PLACE OF BIRTH: _____

ANY PECULIAR ALIMENT? ☐ IF YES STATE: _____

SECTION B (PARENT'S INFORMATION)

FATHER'S NAME: _____ NATIONALITY: _____

ADDRESS: _____

OCCUPATION: _____ PHONE N0: _____

OFFICE ADDRESS: _____

E-MAIL: _____ FACEBOOK: _____

MOTHER'S NAME: _____ NATIONALITY: _____

ADDRESS: _____

OCCUPATION: _____ PHONE N0: _____

OFFICE ADDRESS: _____

E-MAIL: _____ FACEBOOK: _____

ATTESTATION

I, _____ promise that my child/ward will abide by all the school rules and regulations and also pay child/ward's fees promptly.

PARENT'S SIGNATURE AND DATE: _____

OFFICIAL USE ONLY

HEAD TEACHER'S COMMENT: _____

ADMISSION STATUS: ☐ IF YES, ADMISSION NUMBER: ☐

SIGNATURE AND DATE: _____