



# SANDTON JUNIOR SCHOOL



WOBULENZI LUWEERO  
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## Student Admission Form

Name in full \_\_\_\_\_ Class of admission \_\_\_\_\_

(Block letters-First/middle/Last (underline name used at home))

Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Section of admission \_\_\_\_\_  
Day Month Year (Day or Boarding)

Birth Place \_\_\_\_\_ Gender \_\_\_\_\_

Ethnicity \_\_\_\_\_ Passport No./ NIN \_\_\_\_\_  
(copy of passport/ National Id)

Expected start date \_\_\_\_\_ Grade to be entered \_\_\_\_\_

Local Address \_\_\_\_\_

Identifying Landmarks \_\_\_\_\_

Student lives with: Mother \_\_\_\_\_ Father \_\_\_\_\_ Both \_\_\_\_\_ Guardian \_\_\_\_\_

### FATHER'S INFORMATION

Father's Name \_\_\_\_\_

Occupation \_\_\_\_\_

Nationality \_\_\_\_\_

Volunteer interests \_\_\_\_\_

Postal Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_

NIN/ Passport No. \_\_\_\_\_

E-mail \_\_\_\_\_

### Emergency Contact

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home No. \_\_\_\_\_ Work No. \_\_\_\_\_ Mob. No. \_\_\_\_\_

### Overseas contact (If applicable)

Name \_\_\_\_\_

Address \_\_\_\_\_

Country \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

## Student Application Cont.

### SIBBLINGS:

Name	Gender	Date Of Birth	School (if applicable)

### PREVIOUS SCHOOL EXPERIENCE , if applicable (three most recent) Attach report cards from the listed schools:

**1. Name:** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Grade attained** \_\_\_\_\_  
**From** \_\_\_\_\_ **To** \_\_\_\_\_

**2. Name:** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Grade attained** \_\_\_\_\_  
**From** \_\_\_\_\_ **To** \_\_\_\_\_

**3. Name:** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Grade attained** \_\_\_\_\_  
**From** \_\_\_\_\_ **To** \_\_\_\_\_

**Has this child ever been suspended or expelled from school?** \_\_\_\_\_  
**When?** \_\_\_\_\_ **Why?** \_\_\_\_\_

	YES	NO
Has your child been involved in any special testing?	<input type="checkbox"/>	<input type="checkbox"/>
Has your child had any special classes?	<input type="checkbox"/>	<input type="checkbox"/>
Has your child had academic difficulties?	<input type="checkbox"/>	<input type="checkbox"/>
Has your child been referred for psychological testing or counseling?	<input type="checkbox"/>	<input type="checkbox"/>
Do you accept your child to attend co-curricular training?	<input type="checkbox"/>	<input type="checkbox"/>
How many years has your child English as the medium of communication?	<input type="checkbox"/>	<input type="checkbox"/>

Describe English language proficiency: Fluent \_\_\_\_\_ Fair \_\_\_\_\_ Poor \_\_\_\_\_  
 Other languages spoken: \_\_\_\_\_ written \_\_\_\_\_

Do you agree for your child to be given a Mathematics and English interview?  YES  NO  
 Do you agree to pay for child's school fees before the child enters the class?  YES  NO  
 Mention the transport mode for your child; **Self**  **Van**  **Guardian/Parent**

*I declare that the above information is correct. I permit my child's full participation in all the school activities including religious instruction, which the school includes in the curriculum.*

Parent's name & signature

Date

Student's name and signature

Date

#### FORMS CHECKLIST

- Application form
- Health Record Form
- School Fees Agreement form
- Child release Form

#### REQUIRED BY THE SCHOOL

- A copy of passport/ national Id (parent and Child)
- Immunization records
- A copy of previous school records (3 report cards)
- Boarding requirements (if applicable)

**Submit your application to the office the Head teacher or e-mail: [info@sandtonjuniorschool.com](mailto:info@sandtonjuniorschool.com)**