

QUEENSLAND ACADEMY, LAGOS

(CO-EDUCATIONAL)

1-5, EBEM-OHA STREET, OFF OKOTA ROAD,
OKOTA-ISOLO



ADMISSION FORM

Admission Form Number

*This application form is an important school document. It should be completed and returned to the **ADMISSIONS OFFICE** of the School*

Surname:.....

Given Names:.....

Date of Birth:.....

(Day Month Year)

Place of Birth:.....

Age:..... Religion:.....

Nationality:..... State:.....

Admission Class:.....

Candidate previous class, name of school and address:.....

.....

Previous School and Address (If any).....

.....

Please state source of introduction to the school:.....

.....

INFORMATION ON PARENTS

Home Address and Telephone Number:.....

..... Fax No:.....

Name of Father in Full:.....

(state title if any)

Occupation:..... Nationality:.....

Name of Mother in Full:.....

(state title if any)

Occupation:..... Nationality:.....

Father's business address, telephone, numbers:.....

.....

Mother's business address, telephone, numbers:.....

.....

Name of Stepfather and/or Stepmother if applicable:.....

.....

State address, telephone, number of Guardian if applicable:.....

.....

Declaration by student: I.....
(state title if any)

Declare that the information provided in this application form is to the best of my knowledge and believe correct in every detail and promises to abide by the rules and regulations of the school if admitted.

Usual Signature of Candidate:..... Date:.....

Signed (Parent or Guardian):..... Date:.....

FOR OFFICIAL USE ONLY

Score in the entrance examination:.....

Score in any other examinations:.....

Admitted/Not Admitted:..... Date:.....

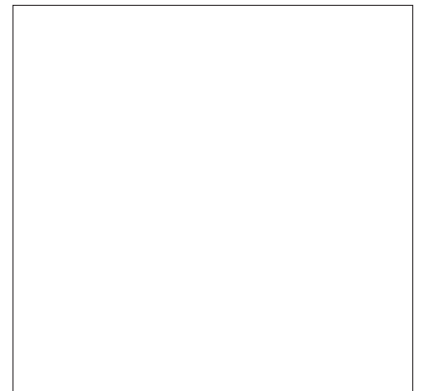
Class:..... School Admission Number:.....

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EXAMINATION SLIP

Admission Form Number: _____

(This Examination slip is to be detached and kept by candidate)



Name of Candidate:.....
(Surname first)

Home Address:.....

.....Receipt Number:.....

Class to which admission is sought:.....

Examination Date:..... Time.....

Venue:.....