



QUEENSLAND ACADEMY

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ADMISSION APPLICATION FORM

(Nursery / Primary / Secondary)

Kindly complete this form accurately. Fields marked with * are compulsory.
Please write in **BLOCK LETTERS**.

Affix Passport
photograph here

A. CANDIDATE'S INFORMATION

Surname*			
First name*			
Middle name*			
Date of Birth *	/	/	(DD/MM/YYYY)
Age			
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Place of Birth			
Religion			
State of Origin			
Local Government Area (LGA)			
Nationality			
Class Seeking Admission Into *			
Previous Class			
Name of Previous School *			
Address of Previous School *			

B. FATHER'S INFORMATION

Father's Full Name *	
Home Address	
Telephone Number	
Email Address	
Profession / Occupation	
Nationality	
Office / Business Address	

C. MOTHER'S INFORMATION

Mother's Full Name *	
Home Address	
Telephone Number	
Email Address	
Profession / Occupation	
Nationality	
Office / Business Address	

D. GUARDIAN'S INFORMATION

(To be completed if different from parents)

Guardian's Full Name *	
Home Address	
Telephone Number	
Email Address	
Profession / Occupation	
Nationality	
Office / Business Address	

E. DOCUMENT SUBMISSION

Please submit the following documents along with this application:

- Admission Form Payment Receipt**
- Candidate's Passport Photograph**

F. DECLARATION

I declare that the information provided in this application form is true and correct to the best of my knowledge. I understand that any false information may result in disqualification. I also agree to abide by all the rules and regulations of **Queensland Academy** if the candidate is admitted.

Name of Parent / Guardian: _____

Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

Application Number

Date Received

Admission Level

Nursery Primary Secondary

Admission Class

Admission Status

Approved Not Approved

Remarks

Authorized Signature & Stamp