



# Busybees Parklane British School

9 Hinderer Road, Apapa-Lagos Tel: 07083124788, 0902158258

## STUDENT'S APPLICATION FORM

Date of Application \_\_\_\_\_

Name of child \_\_\_\_\_

Previous school's address \_\_\_\_\_

Class in previous school \_\_\_\_\_

Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_ Home Tel: \_\_\_\_\_ Home Address \_\_\_\_\_

Mother's Mobile Phone \_\_\_\_\_ Mother's Office Phone \_\_\_\_\_

Mother's office & Address: \_\_\_\_\_

Father's Mobile Phone \_\_\_\_\_ Father's Office Phone \_\_\_\_\_

Father's office & Address: \_\_\_\_\_

\_\_\_\_\_ Email Addresses of both parents (a) \_\_\_\_\_ (b) \_\_\_\_\_

### HEALTH

Allergies \_\_\_\_\_

Any other health considerations? \_\_\_\_\_

### Release

At the end of the day, the child(ren) may be released to the following persons: (Please include passport photo of each person.)

Name \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

### Emergency

If parent cannot be reached, contact:

**Pediatrician:** Name \_\_\_\_\_ Tel: \_\_\_\_\_

Address \_\_\_\_\_

### Parent's Apapa Friends / Relatives

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Tel: \_\_\_\_\_ Tel: \_\_\_\_\_

Parent's signature \_\_\_\_\_

Name: \_\_\_\_\_

### Official use only

Date of Admission \_\_\_\_\_ Cause of withdrawal: \_\_\_\_\_

- Please attach
- (1) Photocopy of child's birth certificate
  - (2) One passport photo of child
  - (3) Photocopies of child previous school reports for the past year.
  - (4) Passport photo of the person(s) to whom your child may be released, including your spouse.
  - (5) Application Form & Exam fees - ₦10,000
  - (6) Vaccination Records