

LAURELS MODEL SCHOOL

PORT HARCOURT

... Laurels-city on a hill

SECONDARY SCHOOL

MINI ORLU ROAD, OFF ADA GEORGE RD, MILE4, PORT HARCOURT
e-mai: lauresofexcellence@yahoo.com. Tel:=234-802-3256 921,084-886-200, 0703-878-8985

APPLICATION FORM FOR ADMISSION

AFFIX PHOTO

CHILD'S INFORMATION

| SURNAME: | | | | |
|--------------------------|------------|--------------|--------|--|
| FIRST NAME: | | | | |
| GENDER: | MALE | | FEMALE | |
| DATE OF BIRTH: | | | | |
| PLACE OF BIRTH: | | | | |
| RELIGION: | | | | |
| HOME ADDRESS: | | | | |
| NATIONALITY: | STATE OF O | RIGIN: | | |
| HOME TOWN: | | | | |
| LAST SCH. ATTENDED: | | | | |
| ADDRESS OF LAST SCHOOL: | | | | |
| | | | | |
| FAMILY BACKGROUND FATHER | | | | |
| NAME: | | NATIONALITY: | | |
| OFFICE ADDRESS: | | | | |
| TEL NO. | CEL | L PHONE: | | |
| HOME ADDRESS: | | | | |
| TEL NO. | e-mail: | | | |

| POSTAL ADDRESS: | | | |
|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | | | |
| FAMILY BACKGROUND OF MOTHER | | | |
| NAME: | NATIONALITY: | | |
| OCCUPATION: | RELIGION: | | |
| TEL NO. | CELL PHONE: | | |
| BUSINESS ADDRESS | | | |
| POSTAL ADDRESS: | Martin Ma | | |
| e-mail: | | | |
| PARENTAL STATUS | | | |
| MARITAL STATUS: | | | |
| NUMBER OF SIBLING | S: | | |
| POSITION OF STUDENT AMONG SIBLINGS: | | | |
| | | | |
| GUARDIAN'S INFORMATION (IF APPLICABLE) | | | |
| NAME: | NATIONALITY: | | |
| OCCUPATION: | RELIGION: | | |
| BUSINESS ADDRESS | 5: | | |
| TEL NO. | CELL PHONE: | | |
| POSTAL ADDRESS: | | | |
| e-mail: | | | |
| | | | |
| METHOD OF FEE PAYMENT | | | |
| PRIVATE | | | |
| SCHOLARSHIP | | | |
| COMMUNITY | | | |