



BISHOP JAMES YISA MEMORIAL SECONDARY SCHOOL

P.O. BOX 226, KWAMBA - SULEJA, NIGER STATE

Motto: In God We Trust

No: 1960

APPLICATION FOR ADMISSION

1. Name _____
*Surname**Forename*
2. Sex _____
3. Age _____
4. Date of Birth _____
5. Local Government Area _____
6. State of origin _____
7. Religion _____
8. Mother's Tongue _____
9. Other Language(s) _____
10. Residential Address: _____
11. Name and Address of Father/Guardian

12. Phone No. _____
13. Religion of Father/Guardian _____
14. Occupation of Father/Guardian _____
15. Class last attended _____ Date _____
16. Common Entrance No. _____
17. School(s) Attended

18. Requirements:

(a) Transfer certificate number (c) Common Entrance Slip Form I Only

(B) Recent promotional report sheet (photocopy)
19. Boarding Day
20. Your School Headmaster/Principal's comment of Psychomotor _____

21. Your last school result (Transfer student only)

S/No.	Subjects Offered	Grades Obtained

22. HEALTH RECORD: (attach)

- a. Parent/Guardian family Hospital/Clinic.....
- b. Common ailment (s) of the child.....
- c. Health certificate from the School Clinic is accepted.

FOR OFFICE USE

Principal Comments & Recommendations

Class & Arms of the class.....

Admission number.....

Principal's Signature & Stamp