

Admission Form (2020/2021 Session)

Upload passport photograph of mum dad guardian and child

Please read carefully, complete, sign and return to:

Britarch Schools

Voice of Nigeria way, off airport road, Lugbe Abuja www.britarchschools.com

Child Information		
Surname:		
First Name:		
Middle Name(s):		
Known as:		
Gender:		
Date of birth (dd/mm/yy):		
State of Origin:		
Nationality (Nationalities):		
1st Language:		
2 nd Language:		
Preferred date of admission:		
Name(s) of siblings currently in school (if any)		
Are you a returnee family to BSA?		
School Information		
Current School/Previous School:		
Current grades:		
Current year group:		
Reason(s) for leaving previous school		
Child's Medical Condition	No	Yes (please give details)
Any major health concerns:		
Learning Needs	No	Yes (please give details)
Any special education needs (SEN)/ Learning support currently received:		

Parent Information	n Pa	Parent 1		Parent 2
Surname				
Forename(s)				
Nationality (nation	nalities)			
1st Language				
2 nd Language				
Mobile number:				
Email address:				
Occupation:				
Religion:				
Child lives with (please tick)	Both parents	Parent 1	Parent 2	Other (please specify)
Contact Information	on			
Address:				
City:				
Emergency contact	••			
IOTE: WE OPERATE A S	STRICT "NO REFUNI	D" POLICY		
	esult:			
Admission No:	Date o	of Admission	:Class	s Admitted into:
Registration fee:				
eing the parent/gu	ardian of this p	rospective pu	pil/student here	by confirm that the information
iven above us corre	ect and all releva	nnt informatio	on about my child	d has been provided.
Signature:				
Date:				