

7, St. Augustine's Street, Idimu-Titun, Lagos. P.O.Box 3158, Oshodi, Lagos – Nigeria.

Land Line: 07039863384 Telephone: 08023065889,

08023065889.

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APPLICATION FOR ADMISSION FORM

		Date
Name of Parent,	'Guardian	
Present Address	of Parent	
Telephone No o	f Parents	
Occupation of Pa	arent/Guardian	
Contact in case of	of Emergency	
Previous School		
. Last Class/Schoo	<u> </u>	Progress Report to be attached
_	d promise to abide by the on the Education of my C	
promise to pay hi	s/her/their tuition for re	gularly in advance.
Signature of parent/Guardian		Date
	FOR OFFICIAL US	E ONLY
dmission No		Data Admitted
.uiiissioii N <u>o</u>		_ Date Admitted
ass Admitted into		
		/**
	Headmaste	r/Headmistress
	Headmaste	r/Headmistress