

PICTURE HERE

LAGOS MUSLIM INTERNATIONAL

• NURSERY & PRIMARY SCHOOL

Sch. 1 Address: 17, Sadaatu Street, Off Lawal Street, By Clem, Jankara-Ijaiye, Lagos State. Sch. 2 Address: 73, Clem Road, Jankara-Ijaiye, Lagos State.

Tel: 09093282228, 08028776546, 08080439818,

E-mail: admin@lamisinternational.org

Website: www.lamisinternational.org.

Admission Form

Please complete each section in **BLOCK LETTERS** using Black Ink

Section 1: CHILD'S PERSONAL DETAILS

| Section 1. Child's Personal Defails | |
|--|--|
| Child's Name: | |
| Surname: | Father's Name: |
| Date of Birth: | Place of Birth: |
| State of Origin: | Local Govt. Area: |
| Nationality: | Male: Female: |
| Address: | |
| Father's / Guardian's Mobile No: | |
| Residential Tel. No: | Office No: |
| Language(s) commonly spoken at h | ome (1):(2): |
| Section 2: ACADEMIC DETAILS | (-), |
| Name of School (Any City/Country) Section 3: PERSONALITY AND HEALTH | Class Form To |
| Please, provide details of any special a | aspects of your child's personality and health challenges: |
| Section 4: PARENT / GUARDIAN'S DA Father's Name: | TA |
| Profession: | Designation & phone No: |

| Mother's Name: | Phone No: | | |
|--|--------------------------|--|--|
| Mother's occupation: Housewi | fe Profession: | | |
| Section 5: DECLARATION | | | |
| I confirm that, to the best of my knowledge, the information provided in this form is correct. | | | |
| I have understood and agreed to abide by all school rules including school discipline, | | | |
| tuition fee payment. I also acknowledge that while the school does its best to ensure the | | | |
| safety of each child's life, health and property, the school cannot be held responsible for | | | |
| any damage to these. | | | |
| , | | | |
| Signature of Parent/Guardian | Date | | |
| Signatory's Name: | | | |
| Signatory's Relationship with the child: | | | |
| Section 6: ADMISSION PROCEDURE | | | |
| The completed admission form along with the copies of birth and health certificates, 3 passport size photographs and the registration fee (non-refundable) must be submitted to the school office. | | | |
| After the admission form has been processed, a date is given for applicant's assessment. Parents are informed of the outcome within one week of the written test date. If a place is | | | |
| offered, the child's admission/enrolment must be confirmed and all dues paid within one week of date of offer. | | | |
| FOR OFFICE USE ONLY | | | |
| Account Number: | | | |
| Form Checked by: | Registration Fee Paid on | | |
| Birth Certificate Provided: | Teller | | |
| Photograph Provided: | Admission Fee: | | |
| School Leaving Certificate: Yes: | Tuition Fee: | | |
| Written Test: Pass: Fail: | Total Cash: | | |
| Date: | | | |
| Child Interviewed by: | | | |
| Parent Interviewed by: | | | |
| Acceptance / Rejection: A R | | | |
| Reason for rejection: | | | |
| Cionatura of Account | Discoulous | | |
| Signature of Accountant | Director | | |