



EFAB INTERNATIONAL SCHOOL

Efab Estate Mbor, PMB 732,

Life Camp, Abuja.

Email: info@efabintlschool.com

www.efabintlschool.com

Tel: 08065714085, 07039722786, 08171764417

Please
Affix
2 Passport
Photographs

APPLICATION FORM

Pupils Details:

Surname..... Date of Application.....

Other Names.....

Home Address.....

Date of Birth..... Place of Birth..... State of Origin.....

(Copy of Birth Certificate must be submitted)

Nationality..... Religion..... Male Female

Language Spoken at Home.....

Proposed Term and Year of Entry.....

Class of Entry: Nursery 1 Nursery 2 Nursery 3
JSS1 JSS2 SS1

Current School Attended with Date

Name and address of present school.....

Name of Head Teacher/Principal..... Current Class.....

Date of Entry..... Date of Leaving.....

How did you first hear about EIS?

Father's Details

Father's Full Name.....

Occupation..... Marital Status (Married Separated Divorced

Address.....

Tel (Work)..... Tel (Home)..... Tel (Mobile).....

Mother's Details

Mother's Full Name.....

Occupation..... Marital Status (Married Separated Divorced

Address.....

Tel (Work)..... Tel (Home)..... Tel (Mobile).....

If divorced or separated who has custody of child?.....

A COPY OF THE BIRTH CERTIFICATE MUST ACCOMPANY THIS FORM AND A NON-REFUNDABLE FEE OF N 10, 000

Declaration

I hereby certify that the information provided are true and I agree to abide by all terms and conditions of the school.

Signed.....
(Father / Guardian) (Mother / Guardian)

Date..... Date.....