AMAO COMPREHENSIVE COLLEGE

JUNIOR SECONDARY SCHOOL SECTION

ADMISSION FORM

Address: Amao Road, Barracks Area, Behind IDGS, Iseyin, Oyo State

Phone: +234 803 464 8693, +234 703 195 0633

SESSION: _____ **ADMISSION NO.:** _____

PASSPORT PHOTOGRAPH: Affix recent passport photograph here.

A. STUDENT'S PERSONAL INFORMATION

Surname: _____	**First Name:** _____ _____	**Middle Name:** _____	**Gender:** ■ Male ■ Female
Date of Birth: _____	**Place of Birth:** _____	**Nationality:** _____	**State of Origin:** _____
LGA: _____ _____	**Religion:** _____ _____	**Phone:** _____ _____	**Email:** _____ _____
Residential Address: _____ _____			

B. ADMISSION INFORMATION

Class Applied For: ■ JSS 1 ■ JSS 2 ■ JSS 3	**Type:** ■ New ■ Transfer	**School Bus:** ■ Yes ■ No	**Application No.:** _____
How did you hear about the school? ■ Recommendation ■ Social Media ■ Website ■ Friend/Family ■ Advertisement			

C. PREVIOUS SCHOOL INFORMATION

Previous School: _____ _____	**Last Class:** _____	**Year Completed:** _____	**Phone:** _____
School Address: _____ _____			
Reason for Leaving: _____ _____			

D. PARENT/GUARDIAN INFORMATION

Father/Guardian Name: _____	**Occupation:** _____ _____	**Phone:** _____	**Email:** _____
Mother/Guardian Name: _____	**Occupation:** _____ _____	**Phone:** _____	**Email:** _____
Office/Business Address: _____			

E. EMERGENCY CONTACT

Name: _____ _____	**Relationship:** _____	**Phone:** _____	**Alternative Phone:** _____
Address: _____ _____			

F. FAMILY INFORMATION

Number of Children: _____	**Student's Position:** _____	**Sibling(s) in School:** ■ Yes ■ No	

G. EDUCATIONAL INFORMATION

Favourite Subject 1: _____	**Favourite Subject 2:** _____	**Favourite Subject 3:** _____	**Special Needs:** ■ Yes ■ No
Talents/Interests: ■ Sports ■ Music ■ Art ■ Debate ■ ICT ■ Reading/Writing ■ Other: _____			

MEDICAL INFORMATION

Known medical condition? ■ Yes ■ No	**Known allergy?** ■ Yes ■ No	**Blood Group:** _____	**Genotype:** _____
Medication currently taken? ■ Yes ■ No	**Doctor/Hospital:** _____		

I. REQUIRED DOCUMENTS

■ Birth Certificate/Age Declaration ■ Passport Photographs ■ Previous School Report ■ Transfer Certificate (if applicable) ■ Primary School Leaving Certificate

J. PARENT/GUARDIAN DECLARATION

I/We certify that the information provided in this admission form is true and correct to the best of my/our knowledge. I/We agree that the student will abide by the rules, regulations, policies and code of conduct of Amao Comprehensive College. I/We understand that providing false information may lead to withdrawal of admission.

Name of Parent/Guardian: _____	**Signature:** _____	**Date:** _____	**School Stamp:** _____

K. FOR SCHOOL USE ONLY

Application Received By: _____	**Date Received:** _____	**Entrance Score:** _____	**Interview Score:** _____
Admission Status: ■ Admitted ■ Not Admitted ■ Waitlisted	**Class:** _____	**Admission No.:** _____	**Principal:** _____