AMAO COMPREHENSIVE COLLEGE

SENIOR 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: ■ SS 1 ■ SS 2 ■ SS 3	**Type:** ■ New ■ Transfer	**School Bus:** ■ Yes ■ No	**Application No.:** _____
Preferred Track: ■ Science ■ Arts/Humanities ■ Commercial ■ Other: _____			

C. PREVIOUS SCHOOL INFORMATION

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

D. ACADEMIC INFORMATION

BECE/Junior WAEC Year: _____	**Exam No.:** _____	**School:** _____	**Overall Result:** _____

Subject	**Grade**
English Studies	_____
Mathematics	_____
Basic Science	_____
Basic Technology	_____
Social Studies	_____
Civic Education	_____
Computer Studies/ICT	_____
Religious Studies	_____
Business Studies	_____

Other	_____

E. SENIOR SECONDARY SCHOOL COURSE PREFERENCE

Preferred Area: ■ Science/Technology ■ Arts/Humanities ■ Commercial

Preferred Future Career: _____

Preferred subjects/areas of interest: _____

D. PARENT/GUARDIAN INFORMATION

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

G. EMERGENCY CONTACT

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

H. FAMILY INFORMATION

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

I. MEDICAL INFORMATION

MEDICAL INFORMATION

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

J. STUDENT'S SKILLS, TALENTS AND INTERESTS

■ Sports/Athletics ■ Music ■ Drama ■ Debate/Public Speaking ■ Writing/Journalism ■ ICT/Programming ■ Entrepreneurship ■ Leadership ■ Art/Creative Design ■ Science/Innovation

Major talent, achievement or interest:

_____
_____

K. REQUIRED DOCUMENTS

■ Birth Certificate/Age Declaration ■ Passport Photographs ■ Junior Secondary School Result ■ BECE Result/Certificate ■ Transfer Certificate (if applicable) ■ Previous School Report

L. 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 to support the student in complying with the academic, disciplinary and general regulations of Amao Comprehensive College. I/We understand that the school reserves the right to withdraw admission if any information supplied is found to be false or misleading.

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

M. FOR SCHOOL USE ONLY

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