P.C.E.A ST. NINIANS SCHOOL

P.O BOX 917 NAKURU
CONTACT: 0769888262

ADMISSION FORM:

ADMISSION NO. _____

PART A: <u>TO BE COMPLETED BY THE PARENT/GUARDIAN</u>

Name of the Child_____ Grade/class_____

Date of birth_____

Date of Admission_____ U.P.I NO._____

Birth Certificate No._____

Name of Pre-school/Primary school attended_____

Father's Name_____ Tel.No_____

Profession_____ Employer/Business_____

Mother's Name_____ Tel No._____

Profession_____ Employer/Business_____

Guardian's name_____ Tel. No_____

Profession_____ Employer/Business_____

Residential Address_____ Place/Distance from School___

Does the child suffer from any particular disease(s) which in doctor's opinion he/she cannot perform physical Education or any other school activity? Yes/No

_____

If YES specify and attach Doctors Report

_____

<u>SCHOOL VISION</u>

Train a child in the way He/She should go and when He /She is old will not depart from it

<u>SCHOOL MISSION</u>

Teaching our Children in a Christian background to be responsible member of the society.

PART B: SCHOOL RULES

1. Parent/guardian will be in charge of providing their children with school uniforms and keeping them clean and neat.

2. They will be expected to provide maximum co-operation with school administration in enforcing school rules and regulations in order to attain a high discipline in the school.

3. Parents/Guardians will be expected to keep themselves well informed on their children's school progress by seriously studying the monthly and terminal progress with their class teacher or Head teacher.

4. No Parent/Guardian will be allowed to interrupt the child's learning during school hours without permission from the Head teacher.

5. All Parents/Guardians will be required to attend parent's meeting to be informed about the progress of the school. Parent/Guardian who regularly fails to attend Parents meeting may be liable for penalty.

6. All Parents/Guardians must make sure that they do not send children to school when they are sick. In the event of a child falling sick, the child will be taken to the nearest hospital. The Parent/Guardian will bear the cost of all expenses incurred.

7. The files will be given to the child at the end of each term if the fee is cleared.

8. Note that the school fees for term one and two can be payable in two installments, i.e. 75% of the school fees to be paid on the 1st day of the term and the 2nd installment 25% to be cleared immediately after Midterm. For term three, 75% to be paid on the 1st day of the term and 25% to be cleared the 1st week of the 2nd Month. Pay bill No. 4063669, Account Number: Child admission No. Note that no cash or M-Pesa transaction will be accepted; kindly pay on time to allow smooth learning conditions.

9. TIME: Primary school learners from Grade 4 to 9 are to be in school by 7:00 A.M, while the ECD section is to be in by 7:30 A.M, and to be picked between 4:00 pm and latest 5:15 pm, failure to which you'll be charged Ksh 100.

10. Do inform the office if there is a change in telephone numbers, for easy communication when the child is sick.

11. Please ensure that you meet the teacher once per term to know the progress of your child. In case you need to see the teacher, ensure you pass through the office.

12. Any damage of school property should be replaced immediately by the Parent/Guardian if the child is involved directly.

13. Note: no fee is refundable or carried forward in case of absenteeism from school. Budget is done once.

I have read and understood the above regulations and agree to abide by them.

Parent/Guardian Name: _____ SIGN: _____ DATE: _____

PART C: OFFICIAL USE ONLY

I have seen the above information. I have, beyond doubt, formed an opinion that this child will DO WELL / NOT DO WELL in my school. I therefore _____.

Headteacher: _____ SIGN: _____ DATE: _____

OUR MOTTO: "EDUCATION IS THE WAY TO GO"