

HILLS EDUCATION CENTRE MBITA

"Fountain of Knowledge"

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PRIMARY SCHOOL APPLICATION FORM (PP1 - Grade 6)

SECTION 1: STUDENT INFORMATION

Student Full Name: _____

Date of Birth: _____ Age: _____

Gender: Male Female

Birth Certificate No: _____

Attendance Mode: Physical (On-Campus) Online (E-Learning)

SECTION 2: PARENT/GUARDIAN INFORMATION

Parent/Guardian Name: _____

Relationship: _____

Phone Number: _____ Alt. Phone: _____

Email Address: _____

Home Address: _____

SECTION 3: ACADEMIC INFORMATION

Grade/Class Applying For: _____

Previous School (if any): _____

Last Grade Completed: _____

SECTION 4: MEDICAL INFORMATION

Any Medical Conditions/Allergies: _____

REQUIRED DOCUMENTS (Please attach copies)

- Birth Certificate
- Immunization Records
- Transfer Letter (if applicable)
- _____