

Muleba Secondary School

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8826

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ADMISSION FORM

This form should be filled in by the student and submitted on the day of admission.

1. STUDENT PARTICULARS

	Student's full name:		
	Date of Birth:	• • • • • • • • • • • • • • • • • • • •	
	Tribe:		
	Religion/Denomination:		
	Birth certificate number (or confirmation)		
	Previous school:		
2.	PARENTS' PARTICULARS		
	Father's/Guardian full name:		
	Occupation:		
	Office Address:	.Tel:	
	Home Address:	.Tel:	
	District:Country:		
	Email Address (if available):		
	Mother's full name (if alive):		
	Occupation:		
	Office Address:		
	Home Address:		
	District:		
	Email Address (if available):		

The above-mentioned student has been accepted/not been accepted.	
OFFICIAL USE	
Signature	Signature
Parent/Guardian	Student
I declare that the above given in	formation is true to the best of my knowledge
	pposed to present the Doctor's examination report or
handled	dicate the way your child should be
	nealth problems? Please indicate: Yes No