

COVENANT MISSION ACADEMY ADMISSION FORM

Application Form

The acceptance of your candidacy shall be subject to the strict selection criteria upon satisfactory completion of written and oral interviews.

Choose Passport photograph file.
Type .jpg, .png, .gif

Surname:

Other Name:

Middle Name:

Date of Birth:

State of Origin:

Nationality*:

Religion*:

Male Female

First Language:

Other Language:

Year of Entry:

Class of Entry: PRE-NURSERY, KG 1, KG2, BASIC 1, 2, 3,4. JSS1, JSS2, JSS3, SS1,SS2 & SS3

Previous school attended:

Parent Details:

Father's Name:

Occupation:

Married Separated Divorced

Address:

Work Telephone:

Mobile phone No:

E-mail address:

Mother's Details

Mother Name:

Occupation:

Married Separated Divorced

House Address:

Office Telephone:

Mobile phone:

E-mail address:

If divorced or separated, who has the custody of the child.

Any disability: Yes No please specify, if assistance is required.

Send: By clicking send, you have consented that all information provided is true and you will abide by all terms and conditions of the school.