



# APPLICATION FORM

*This form cost is shs. 20,000/- ( non refundable )*

*This form is to be filled out by the parent or guardian of any **NEW STUDENT** requesting admission to Leera School.*

Student's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade Entering \_\_\_\_\_

Parent(s)/Guardian(s)  
Name: \_\_\_\_\_  
Father \_\_\_\_\_ Mother \_\_\_\_\_

Phone No 1: \_\_\_\_\_ Phone No 2: \_\_\_\_\_

With whom does the child live? \_\_\_\_\_ Primary Language \_\_\_\_\_

Name of last school attended \_\_\_\_\_

Address of last school attended: \_\_\_\_\_ Contact No: \_\_\_\_\_

Number of Schools attended since 1<sup>st</sup> grade \_\_\_\_\_

Name of School \_\_\_\_\_ Phone No. \_\_\_\_\_

Reason for leaving last school attended: \_\_\_\_\_  
\_\_\_\_\_

Has your child ever been retained/Skipped? \_\_\_\_\_  
If yes, what grade and name of school.  
\_\_\_\_\_  
\_\_\_\_\_

Has your child ever been home schooled? \_\_\_\_\_  
If yes, what grade level(s)?  
\_\_\_\_\_  
\_\_\_\_\_

Does your child have any medical condition of which the school should be aware (i.e. asthmas, allergies, diabetes, etc.)?  
\_\_\_\_\_  
\_\_\_\_\_

Has your child ever been suspended or expelled? \_\_\_\_\_  
If yes, please give reasons why:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you find us? \_\_\_\_\_

Is there other information you feel would be helpful to our school regarding your child?

*I hereby certify that the information contained in this **Application Form** is true and correct to the best of my knowledge. I agree to have any of the statements verified, and authorize the references included in this packet to provide the school any and all information concerning the applicant. I understand that any misrepresentation, falsification, or material omission of information concerning this student may result in dismissal of the student from school.*

*I give permission and consent for you to receive copies of all school records.*

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**Parent/Guardian Name**

**Signature**

**Date**