ST.MARY'S HIGH SCHOOL - GAYAZA

Our Ref: SMHG/ADM/APPL
Your Ref:.....

TEL: 0701 162 447 || 0772 503 087

Website: www.stmaryshighschoolgayaza.com

Receipt No:..... Date: .....

APPLICATION FORM FOR ADMISSION TO A' LEVEL

PASSPORT PHOTO

(**Use block letters**)

NAMES: .....

(Use names you registered with UNEB) EMIS/LIN No:.....

Date of birth: ..... SEX:.....RELIGION: ..... NATIONALITY: .....

HOME DISTRICT: ..... CURRENT RESIDENCE: .....VILLAGE: .....

FATHER'S NAME: .....OCCUPATION: .....TEL:.....

MOTHER'S NAME: .....OCCUPATION: .....TEL:.....

NIN NUMBER (PARENT).....

NEXT OF KIN..... OCCUPATION: ..... TEL: .....

RELATIONSHIP: .....

FORMER SCHOOL: .....

UCE GRADES OBTAINED.....YEAR: .....INDEX NUMBER:.....

SUBJECT	**GRADE**	**SUBJECT**	**GRADE**	**SUBJECT**	**GRADE**
English		History		Commerce	
Physics		Geography		Computer	
Chemistry		Literature		Typing	
Biology		Luganda		Accounts	
Mathematics		French		Fine Art	
Agriculture		German		Foods and Nutrition	
Technical Drwg.		C.R.E		Entrepreneurship	

GRADE: ..... AGGREAGATE IN BEST 8: .....

(**Attach photocopy of results slip**)

Combinations applied for (**See over leaf for available combinations**)

1ST _____ 2ND _____ 3RD _____

Any special interest/co curricular activities (**attach certificates of merit**).....

Do you have any medical problem? (These should be certified by a medical doctor)

.....

I .....certify that the information given above is true and here by undertake to abide by the rules and regulations if admitted.

Sign: (**STUDENT**): ..... **PARENT**: .....