

Please add
one passport
picture

**CENTRAL GOSPEL SCHOOL,
HOLY GHOST TEMPLE - ADENTA FRAFRAHA
ADMISSION FORM**



CHILD'S PERSONAL INFORMATION:

Surname: _____

First name: _____ Other name: _____

Date of Birth: _____ Age: _____ Sex: Male Female

Nationality: _____ Place of Birth: _____

Mother tongue: _____ Religion: _____

Blood Group: _____ Medical Information: Any known allergies: Yes No,

If yes, give details: _____,

Medical conditions: Yes No, If yes, give details: _____,

Disability: Yes No, If yes, give details: _____,

CLASS APPLYING FOR:

Creche Nursery Kindergarten Class 1-3

FAMILY DATA:

Father's Full name: _____

Father's Occupation: _____ Location _____

Father's Mobile Number(s): _____ / _____

Father's Email: _____ Religion: _____

(Email address and phone numbers will be used for emergency contact purpose also)

Mother's Full name: _____

Mother's Occupation: _____ Location _____

Mother's Mobile Number(s): _____ / _____

Mother's Email: _____ Religion: _____

(Email address and phone numbers will be used for emergency contact purpose also)

(If Guardian is different from the above)

Guardian's Full name: _____

Guardian's Occupation: _____

Guardian's Mobile Number: _____

Guardian's Email: _____

RESIDENTIAL ADDRESS:

House Number/Town: _____

Digital/GPS address: _____

Postal Address: _____

Checklist and Documentation

Please attach the following documents and tick the appropriate box:

- Birth Certificate
- Vaccination Records
- Weighing Card
- Last Term's Report (For Admissions to Basic 1-3)
- Any other relevant document (if applicable)

DECLARATION:

I declare that the information provided above is true and accurate to the best of my knowledge. I fully understand that any false information may result in the cancellation of my child's admission.

Signature of Father / Guardian: _____ Date: _____

Signature of Mother / Guardian: _____ Date: _____

Submission: All completed hard copy admission forms with attached documents should be submitted to the School Reception at Central Gospel School, Holy Ghost Temple – Adenta, Frafraha. Thank you. [Tel:0535099944](tel:0535099944), [Email:Centralgospelschool@gmail.com](mailto:Centralgospelschool@gmail.com)



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