



# Gentle Touch Schools

35, Dr. Fasheun Street, off century Bus stop.  
22, Wahuha Sireet, O Community Bus-Stop Ago Palace Way

## Admission Form

PUPIL'S PASSPORT  
PHOTOGRAPH HERE

### PERSONAL BIODATA

Name: \_\_\_\_\_

Date Of Birth:          
D D M M Y Y Y Y

Gender:    
Male Female

Position Of Child In Family: \_\_\_\_\_ Blood Group: \_\_\_\_\_ Genotype: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Nationality: \_\_\_\_\_ State Of Origin: \_\_\_\_\_ City: \_\_\_\_\_

Extra Curricular Interests: \_\_\_\_\_

### PATERNAL(FATHER'S) INFORMATION

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Date Of Birth:          
D D M M Y Y Y Y

Phone Number: + \_\_\_\_\_

### MATERNAL(MOTHER'S) INFORMATION

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Date Of Birth:          
D D M M Y Y Y Y

Phone Number: + \_\_\_\_\_

### SIBLING'S INFORMATION

Name	Age	Bitday