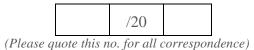
## AFFIX

## PHOTOGRAPH

## KIANDA SCHOOL

APPLICATION FORM





GRADE \_\_\_\_\_

PRIMARY SCHOOL						
udent's Name:		Date of birth: dd/mm/yyyy				
Last Name	First Name	Middle Name		aa/mm/yyyy		
Citizenship:	Place of birth					
Religion Denomination:						
Kindergarten/Nursery or Primary schools attended		Years enrolled	Day	Boarding		
Name of brothers and sisters		date of birth (dd/mm/yyyy)	School attending / attended			
1.						
2.						
3.						
4.						
5.						
6.						
7.						
Place she occupies amongst her brothers and sisters:						
Other persons who live with the family (indicate the relationship and age)						
Name any other daughter, relative or friends who have had some relation with Kianda (e.g. past students, teachers etc)						
Name	Relationship		Class of cu	Class of current student		
Relevant Medical Information						
Indicate if she suffers from e.g. asthma, epilepsy, heart disorders etc.						

	Father	Mother	Guardian(where applicable)		
Name					
Religion/Denomination					
Mobile number					
Profession					
Place of work					
E-mail					
Family Residence					
Estate: House no.:					
Telephone no:  General Information					
Reason for wanting to bring your daughter to Kianda					
How did you get to know about Kianda School? (Please tick)					
Through daughter's school					
A friend/relative					
Kianda Website	Kianda Website Other, please specify				
Have you applied before	e? No	Yes	Year		
Disclaimer and Signature					
I certify that my answers are true and complete to the best of my knowledge					
I have submitted the following documents with this application form:					
An application letter from the Parents/Guardian					
A copy of the girl's birth certificate					
Latest school report					
A recent passport photo of the girl (Photo should not be more than 3 months old)					
Parents signature: Fa	ather:	Mother:			
Guardian's signature:		Date:			
Application fee paid: No Yes MPesa Transaction Date:					