



RUSINGA SCHOOLS NAIROBI

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Head Teacher: Mrs. Echessa-Kariuki

Affix a
passport size
photograph
here

APPLICATION FOR ADMISSION

SENIOR SCHOOL - KEY STAGE 4

1. STUDENT'S DETAILS

NAME OF STUDENT:

(First Name)

(Middle Name)

(Family Name)

PHYSICAL ADDRESS:

NATIONALITY:PASSPORT NUMBER:

RELIGION:SEX: DATE OF BIRTH:

(Day/Month/Year)

ADMISSION REQUIRED FOR YEAR GROUP:STARTING:

(Month/Year)

LAST SCHOOL ATTENDED:

DATE: From to CURRICULUM: Local / BNC/ Others (Specify).....

(Month/Year) (Month/Year)

DESCRIPTION OF ANY LEARNING DIFFICULTY:

DETAILS OF ANY SPECIAL TALENTS:

DOES THE APPLICANT HAVE ANY CLOSE RELATIVES AT RUSINGA? YES / NO

IF YES, NAME: YEAR GROUP:

NAME: YEAR GROUP:

NAME: YEAR GROUP:

2. PARENTS'/LEGAL GUARDIANS' DETAILS

FATHER'S NAME:

(First Name)

(Middle Name)

(Family Name)

(Title)

MAILING ADDRESS:

HOME TELEPHONE NUMBERS:

OFFICE TELEPHONE NUMBERS:

MOBILE TELEPHONE NUMBERS:

FAX: E-MAIL ADDRESS:

OCCUPATION:DESIGNATION.....INSTITUTION.....

MARITAL STATUS:

MOTHER'S NAME:

(First Name) (Middle Name) (Family Name) (Title)

MAILING ADDRESS:

HOME TELEPHONE NUMBERS:

OFFICE TELEPHONE NUMBERS:

MOBILE TELEPHONE NUMBERS:E-MAIL ADDRESS:

MARITAL STATUS:

OCCUPATION:DESIGNATION.....

ORGANISATION.....

IF PARENTS LIVE APART, WHO IS RESPONSIBLE FOR PAYMENT OF SCHOOL FEES?

GUARDIAN'S/EMERGENCY CONTACT

.....

(First Name) (Middle Name) (Family Name) (Title)

MAILING ADDRESS:

HOME TELEPHONE NUMBERS:OFFICE TELEPHONE NUMBERS:

MOBILE TELEPHONE NUMBERS:E-MAIL ADDRESS:.....

OCCUPATION:DESIGNATION.....ORGANISATION.....

.....

3. TRANSPORT

WILL THE APPLICANT REQUIRE USING THE SCHOOL BUS? YES / NO

IF YES, WHICH TRANSPORT ZONE?

WHEN WILL THE BUS BE USED?

(Check one) MORNING ONLY..... / AFTERNOON ONLY..... / MORNING & AFTERNOON.....

4. SCHOOL LUNCH

DOES THE APPLICANT INTEND TO TAKE SCHOOL LUNCH? YES / NO

IF YES, IS THE APPLICANT VEGETARIAN? YES / NO

LIST ANY FOODS NOT TAKEN

5.SURVEY

HOW DID YOU FIRST FIND OUT ABOUT RUSINGA SCHOOL?

(Check one) Sign board / Media / Existing Parent / Members of Staff / Students /School

WHAT ARE YOUR REASONS FOR WANTING YOUR CHILD TO JOIN RUSINGA SCHOOL?

.....

DECLARATION BY THE PARENTS OR LEGAL GUARDIAN

I,.....**Parent/Guardian of**

hereby declare that should admission be granted,

1. I will attend parents meetings, school events or functions arranged by the School, and undertake to co-operate with the school in its programmes and requirements.
2. I will pay full Fees upon admission and thereafter within the first week of every subsequent term failure to which I understand my child will be excluded from class.
3. I will give the Head Teacher at least one term's notice, in writing, of my intention to remove my child. In the event that I do not give this notice, I will pay one full term's School Fees in lieu.
4. I will support the Head Teacher's decision to remove my child from the school if, upon enquiry, he/she is satisfied that my child has committed a grave offence **or** has been wilfully or persistently disobedient or lazy, **or** if he/she is found to be academically unsuitable for the course he/she is following.
5. I will ensure that my child wears the school uniform appropriately including Games and Swimming kits as per the Safety Regulations prescribed for each sport.
6. I will allow my child to participate in all school organised Church and Community Service activities.
7. I will ensure that my child has read the School Rules and abides by them. I will also accept any other rules or regulations as may be reasonably introduced from time to time by the school.
8. I understand that the school does not accept responsibility for damaged/lost property.
9. I understand that absence from school by my child will require a letter of explanation from me or guardian to be submitted to my child's Class Teacher / Form Tutor on his or her return to school.
10. I understand that non-participation in Sports by my child for a medical reason will require a Medical Doctor's note to be submitted to the Games Teacher.
11. I understand that discovery of false certificates, reports etc. presented for admission may lead to the subsequent removal of my child from the School.
12. I understand that discovery of my child testing positive to substance abuse will nullify admission into the school.
13. I accept responsibility for the choice of course undertaken by my child and understand that all courses are subject to approval by the Government.

I also declare that the details given on this form are true and correct. I further declare that the documents attached are true copies of the originals.

SIGNATURE: **DATE:**

CHECK LIST

Admission is considered incomplete without the following compulsory documents:

- Birth Certificate or Passport
- Exam Transcripts
- Last two Progress reports from previous school
- One passport-size colour photograph
- School Leaving Certificate/Reference Letter from the previous school

FOR OFFICIAL USE ONLY

ENTRANCE TEST RESULTS			
SUBJECT	% MARKS	GRADE	HEAD OF DEPARTMENT'S COMMENTS
English Language			
Mathematics			
Other(Specify)			

IGCSE SUBJECT OPTIONS for 2014 / 2015

Compulsory (Examinable)		Compulsory (Non-Examinable)	
<ul style="list-style-type: none"> • English Language • Literature In English • Mathematics 		<ul style="list-style-type: none"> • Games and Clubs • Community Service • Work Experience 	
Optional (All Examinable) Please select 1 subject from each of the 6 blocks			
A		B	
<input type="checkbox"/> Biology		<input type="checkbox"/> French	
<input type="checkbox"/> Chemistry		<input type="checkbox"/> German	
<input type="checkbox"/> Physics		<input type="checkbox"/> Swahili	
C		D	
<input type="checkbox"/> Biology		<input type="checkbox"/> Computer Studies	
<input type="checkbox"/> Business Studies		<input type="checkbox"/> History	
<input type="checkbox"/> Geography		<input type="checkbox"/> Physics	
E		F	
<input type="checkbox"/> Business Studies		<input type="checkbox"/> Art & Design	
<input type="checkbox"/> Chemistry		<input type="checkbox"/> Music	
<input type="checkbox"/> Geography		<input type="checkbox"/> Religious Studies	
<input type="checkbox"/> Economics		<input type="checkbox"/> Physical Education	
D		E	
<input type="checkbox"/> Computer Studies		<input type="checkbox"/> Business Studies	
<input type="checkbox"/> History		<input type="checkbox"/> Chemistry	
<input type="checkbox"/> Physics		<input type="checkbox"/> Geography	
<input type="checkbox"/> ICT		<input type="checkbox"/> Economics	

STUDENT'S SIGNATURE:.....PARENT'S/GUARDIAN'S SIGNATURE:

HEAD OF SENIOR SCHOOL'S COMMENTS:

SIGNATURE: FULL NAME:DATE.....

HEAD TEACHER'S COMMENTS:

SIGNATURE: FULL NAME:DATE.....

ADMISSIONS OFFICE

I have interviewed the student and found him/her suitable for a place in YEAR GROUP

DATE TO BEGIN:SIGNATURE:FULL NAME:DATE.....

2. ACCOUNTS OFFICE

PARENT NUMBER: STUDENT NUMBER:

DISCOUNT: REASONS FOR DISCOUNT:REGISTRATION FEE:TERM FEES:

SIGNATURE: FULL NAME:DATE.....