



HIS GRACE DAYCARE, NURSERY AND PRIMARY SCHOOL KITO

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Location: Kito Kira (Kira Municipality).

P.O.Box 14679 Kireka.

ENROLLMENT/ APPLICATION FORM.

Learner's Name: _____ Gender: _____

Home Address: _____

Date of Birth: _____ Current Age: _____

Name of former school: _____

Place of Birth: _____ Home Telephone No: _____

National ID No. (NN) _____ Learner's ID No (LIN) _____

PARENTS' INFORMATION:

	FATHER	MOTHER	GUARDIAN
NAME			
PHYSICAL ADDRESS (RESIDENCE)			
EMPLOYER			
WORK PHONE			
CELL PHONE			
WORK ADDRESS			
EMAIL ADDRESS			
NATIONAL ID NO.			
RELIGION			

If parents are not together which parent has custody of the child? _____

UNDERTAKING BY THE PARENT/GUARDIAN:

I _____ being the Parent/Guardian of _____
admitted in _____ (class) here by certify that the information I have
given in this booklet is correct.

Signed _____ Date _____