



GREENHILL ACADEMY

P .O. Box 7490, Kampala, Tel: +256(0) 414 342 684,

E-mail: info@greenhillacademy.ac.ug

Website: www.greenhillacademy.ac.ug

STUDENTS APPLICATION FORM

Date of application: _____

1. Pupils details:

- a) Name of child _____ c) Date of birth _____
b) Gender _____ d) Religion _____
e) Any health challenge that the school should know about? _____
f) Class applied for: _____ g) Year: _____

2. Details of residence

- i) Plot No. _____ ii) Sub county: _____
iii) Village/zone _____ iv) District _____

3. What draws you to Greenhill Academy?

- i) _____
ii) _____

4. What kind of Academic education would like Greenhill Academy to provide to your child?

5. What kind of non-academic education would like Greenhill Academy to provide to your child?

- i) _____
ii) _____

5. Parents/Guardians details

- a) Name: _____ b) Tel. contact: _____ Email: _____

c) Have you had any children in Greenhill Academy?

If yes, please give the name and years when they were here.

- i) _____
ii) _____

6. Indicate the schools you have been to and the reason for leaving in the table below;

SCHOOL	YEAR JOINED	REASON FOR LEAVING

7. Attach the following photocopies; (mandatory)

- i) Most recent report card
ii) Applicant's birth certificate
iii) National Identity Cards for both parents and the next of kin