

SmartSchool Admission Form

SmartSchool – Your All-In-One School Management Portal

Website: <https://SmartSchool.sch.ng>

Email: support@smartschool.sch.ng

Phone: +234-906-869-1062

Section A: Student Information

- Full Name: _____
- Gender: ☐ Male ☐ Female
- Date of Birth (DD/MM/YYYY): _____
- Place of Birth: _____
- Nationality: _____
- State of Origin: _____
- Local Government Area: _____
- Home Address: _____
- Previous School Attended: _____
- Last Class Attended: _____
- Applying for Class: _____

Section B: Parent/Guardian Information

Father's Details

- Full Name: _____
- Phone Number: _____
- Email: _____
- Occupation: _____
- Office Address: _____

Mother's Details

- Full Name: _____
- Phone Number: _____
- Email: _____
- Occupation: _____
- Office Address: _____

Guardian's Details (if applicable)

- Full Name: _____
- Relationship to Student: _____
- Phone Number: _____
- Email: _____

- Address: _____

Section C: Medical Information

- Blood Group: _____
- Genotype: _____
- Allergies (if any): _____
- Medical Condition(s): _____
- Doctor's Name: _____
- Doctor's Contact: _____

Section D: Emergency Contact (other than parents/guardian)

- Full Name: _____
- Relationship to Student: _____
- Phone Number: _____
- Address: _____

Section E: Supporting Documents (attach copies)

- ☐ Birth Certificate
- ☐ Passport Photograph (2 copies)
- ☐ Last School Report/Transcript
- ☐ Immunisation Record
- ☐ Transfer Certificate (if applicable)

Section F: Declaration

I, _____ (Parent/Guardian), declare that the information provided above is true and correct to the best of my knowledge.

Signature: _____

Date: _____

For Official Use Only

Admission No.: _____

Date of Admission: _____

Class Admitted Into: _____

Remarks: _____

Authorized Officer's Name & Signature: _____