



P.O. BOX 410233 Central Town Kasama. Contacts, 0761544095, 0971523913, Email: nilelenipvtschool@gmail.com, face book: Nileleni School Kasama.

ENROLLMENT FORM FOR MIDDLE & RECEPTION CLASS ONLY

1. LEARNER'S PERSONAL INFORMATION

	Surname		Grade requested	
	Other names		Date entered school	
	Sex		Previous school	
	Date of birth		Nationality	
	Place of birth		Home address	

PARENTS/GURDIANS INFORMATION

Home address:

Mothers Name: Phone Number.....

Place of employment: Email

Father's Name: Phone Number.....

Place of employment: Email.....

In case of emergency who should be notified immediately

Name: Phone Number.....

Residential area address:

Relationship with the learner:

2. SCHOOL REQUIREMENTS

- ❖ 1 Packet of 10 rolls of tissue per term
- ❖ 1 Ream of paper per term
- ❖ 10 pencils
- ❖ 15 Small exercise books (per term)
- ❖ One packet of wax crayons (per term)

MALE		FEMALE	
K150	Trouser	K250	Dress
K280	Jersey	K280	Jersey
K50	Socks	K50	Socks
K50	Neck tie	K150	T-shirt
K150	T-shirt	K350	Truck Suit
K350	Truck suit		
K200	Shirt		

3. PHYSICAL DEVELOPMENT

Are there any special characteristics or problems which the school should know about in order to give more help to the learner and the family? Include any vision, hearing, physical difficulties and unusual abilities or disabilities of which you are aware of?

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4. SCHOOL FEES

Please note that all the fees must be paid in full at the beginning of every term. Children will not be allowed in school, if school requirement is not fulfilled. Parents and guardians are also encouraged to sign a payment commitment letter to adhere to the terms and condition of the school part-time payments.

- ❖ **Registration fee for new entrants:k100**
- ❖ **Middle & Reception:k2,000**
- ❖ **Transport fee:k1,200**
- ❖ **One-way transport fee:k800**
- ❖ **Transport fee is payable by cash, mobile money (0972468588) or bank deposit into NATSAVE BANK.**
- ❖ **ACCOUNT NUMBER: 3031157116601, NAME: TRANS-BAO LOGISTICS.**

5. CONSENT TO ENHANCE SECURITY OF THE LEARNER

I (Parent/Guardian) being the parent/Guardian to
 in class do hereby confirm that the only
 person (s) allowed to bring my child to and from school is/are;
 Name..... phone number.....

Please note that the school administration will not be responsible for the whereabouts and security of the children after 30 minutes of their knock off time if prior arrangement was not made for late pick up.

By signing this form, you have demonstrated that you will fully accept and will adhere to the terms and conditions of Nileleni private school.

Signature: _____

NOTE: All school fee payments are non-refundable. No cash. Swipe to pay and bank deposits only. After making a deposit, please present the deposit slip to the administration office for issuance of receipt.

- ❖ **School fee is payable by bank deposit into Indo Zambia Bank.**
- ❖ **ACCOUNT NUMBER: Preschool: 0322040000188 NDELENI SCHOOL.**