Application Form

Years 8 & 10 only Entrance Examination

MID-STREAM ENTRANCE EXAMINAT ONLY. THIS IS FOR ADMISSION IN <u>SE</u>		ATTACH PASSPORT PHOTOGRAPH HERE
		20
Please attach <u>copies</u> of the following documents with A copy of your child's full birth certificate or passport A copy of your child's latest academic report A copy of the Bank deposit slip (bank details on page TEST.	data page (scanned copies are acce returning this	form by email)
PLEASE NOTE: THE DEPOSIT FEE IS <u>NON-REFUNDABL</u> PLEASE INDICATE WHICH YEAR YOU ARE APPLYING F	2_	AR 10
Surname of Pupil	First Name(s) of Pupil (Legal N	ames)
Preferred First Name	Date of Birth	
Gender FEMALE / MALE	Nationality	
Main Residential Address	Contact Telephone Number	
	Language(s) spoken	
Preferred Email: (The address to which all correspondence will be sent) PLEASE PRINT	Religion	
Do you have any friends or family at James Hope Col specify	llege? If so	
How did you hear about James Hope College?		





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DETAILS OF CURRENT SCHOOL

Name and Address of Current School	Current Principal
elephone Number	Email
PARENT/GL	JARDIAN CONTACT DETAILS
	Iresses, then correspondence will be automatically sent to both
Full Name and Title of Mother	
Residential Address	EARS 8
Occupation	Nationality
Mobile Telephone	State of Origin
Work telephone	Email Address
Full Name and Title of Father	/
Residential Address	
Occupation	Nationality
Mobile Telephone	State of Origin
Work telephone	Email Address
Preferred Venue: 🔲 ABUJA 🛛 🔲 JHC L	.EKKI LAGOS



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IMPORTANT: Please note that the <u>student</u> is to complete in their <u>own handwriting</u> (not to be typed) and not to exceed the space provided)

WHY I WANT TO BE A STUDENT AT JAMES HOPE COLLEGE?

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	8
Signed ( <i>Parent's signature</i> ):	
Date:	

Upon **completion**, please return to the Registrar, James Hope College, Twin Lakes Estate, Lekki, Lagos. Please include all documentation required as requested.

If you need to email, then please scan and send to <u>admission@jameshopecollege.edu.ng</u> or call +234 708 536 9376; +234 708 366 2229; +234 708 564 4062; +234 701 828 2065 for further clarification or more information.

### **Banking Details**

Please deposit Examination Fee into the following Bank account.

Zenith Bank Plc James Hope College 1222622881 057150013 (sort code) Reference: Name and Surname followed by JHC MID- 2023/24

### CLOSING DATE FOR SUBMISSION: 21st JANUARY 2023

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YES

NO

### CHECK LIST FOR PARENTS

- YOU HAVE READ THROUGH THE APPLICATION FORM
- ATTACHED A COPY OF THE BIRTH CERTIFICATE OR PASSPORT DATA PAGE
- ATTACHED A PASSPORT PHOTO
- ATTACHED A MOST RECENT ACADEMIC REPORT
- ATTACHED A COPY OF THE TELLER
- COMPLETED PAGES 1-3 WITH ALL THE CORRECT INFORMATION

SIGNED: DATE:	
RS	
CE	
SIGNED:	

CLOSING DATE FOR SUBMISSION: 21st JANUARY 2023