ADMISSION FORM

THE HILLTOP PLATINUM SCHOOL  
University P. O. Box 212, Kumasi, Ghana.

**(233) 3222-99229 (233) 0265609987(233)3221-98394**

**A. child**

Surname Other name(s)

Name child is used to Date of birth (DD/MM/YY)

Mother tongue Religion

Telephone number Hometown

Current class Postal Address

Residential Address

**B. Family History**

Name of Father Hometown

Residential Address Postal Address

Religion Occupation

Date of death (if deceased) Number of wives:

Name of mother Hometown

Residential Address Postal Address

Religion Occupation

Date of death (if deceased) : Father’s/mother’s email

Whom does the child live with?: Number of siblings

Please tick this box if parents are still married to each other

**Signature** **Date**

**c. Position in Family**

How many children are in the family?

1st Boy/Girl 2nd Boy/Girl 3rd Boy/Girl 4th Boy/Girl

Do you have any siblings currently attending Hilltop School? YES NO

If Yes, give details of siblings name and class

1. Name class
2. Name class
3. Name class
4. Name class

**D. Emergency Telephone Contacts**

1. Mother’s name Daytime Tel:

2. Father’s name Daytime Tel:

3. Friend/ Relation Daytime Tel:

**E. Medical Information**

Name of Doctor

Hospital Address and Telephone number

Please give details of any allergies, serious illness, sight/hearing problems etc

**F. Additional Language**

Please tick this box if your child speaks another language in addition to the mother tongue at home.

Specify which language.

**G. Transferring from another school?**

If you are transferring your child from another school, please tick here.

Provide the name and address of your child’s current school.

Give brief reason why you wish to transfer your child to the Hilltop School.

You will need to provide the school with a copy of your child’s most recent **school report** and **cumulative record.**

**H. Guardian (if child is not staying with parents**

Name Hometown

Residential Address Postal Address

Religion Occupation

Relationship to pupil Date Guardianship began

Thank you for completing The Hilltop School Admission Form.

Please ensure that you have completed all sections of the form and have attached other information relevant to your application. Tick items which you are including with this form.

**Birth Certificate Recent School Report**

**Weighing card Transfer certificate**

**Cumulative record**

Signature of Parent/Guardian

My signature above indicates that I agree to keep my child/ward in this school subject to rules and regulations of the school.

**Date**

Head teacher’s comments

Office Use Only

Date reserved:…………………………………………………………………………

Attachment received:……………………………………………………………..

Year Group:…………………………………………………………………………….

Staff’s signature………………………………………………………………………..