Admission into:

School ☐ Rainbow College Boarding
☐ Rainbow College Day

Class

AFFIX PHOTO OF STUDENT HERE

CANDIDATE

SURNAME

FIRST NAME

OTHER NAMES

GENDER MALE ☐ FEMALE ☐ DATE OF BIRTH

NATIONALITY STATE OF ORIGIN (IF NIGERIAN)

RELIGION ETHNICITY

FIRST LANGUAGE OTHER LANGUAGES

PREVIOUS SCHOOLS ATTENDED

1. NAME *(Present School)* YEAR
   ADDRESS

2. NAME YEAR
   ADDRESS

3. NAME YEAR
   ADDRESS

AWARDS WON SO FAR IN SPORTS, ARTS OR ACADEMICS

HOBBIES

FAMILY INFORMATION

NATURE OF FAMILY *(please tick)*

SINGLE PARENT ☐ MONOGAMOUS ☐ DIVORCED ☐ SEPARATED ☐ POLYGAMOUS ☐

NUMBER OF CHILDREN

FATHER

NAME DATE OF BIRTH

OCCUPATION NATIONALITY

COMPANY NAME AND ADDRESS

DESIGNATION

TELEPHONE

RESIDENTIAL ADDRESS

TELEPHONES

PREFERRED EMAIL

PREFERRED PHONE NUMBER FOR SMS

MOTHER

NAME DATE OF BIRTH

OCCUPATION NATIONALITY

COMPANY NAME AND ADDRESS

DESIGNATION

TELEPHONE

RESIDENTIAL ADDRESS:

TELEPHONES

PREFERRED EMAIL

PREFERRED PHONE NUMBER FOR SMS

GUARDIAN

NAME Relationship to Student

RESIDENTIAL ADDRESS

TELEPHONES

PREFERRED EMAIL

PREFERRED PHONE NUMBER FOR SMS

EMERGENCY CONTACT NAME | TEL

SIBLINGS

Name	Schools attended	Age
1		
2		
3		
4		

HEALTH/MEDICAL HISTORY

BLOOD GROUP | GENOTYPE

ANY KNOWN DISABILITIES? YES ☐ NO ☐

HEARING: ANY HEARING AIDES YES ☐ NO ☐

VISION: USE OF SPECTACLE OR CORRECTIVE LENSES YES ☐ NO ☐

ALLERGIES

OTHERS *(Please specify)*

SPECIAL INSTRUCTIONS FOR MEDICAL CARE

MISCELLANEOUS

HOW DID YOU HEAR ABOUT RAINBOW COLLEGE?

Newspaper ☐ website ☐ social Media ☐ Other (please specify)

Word of mouth/Referral *(please state name and contact)*

DECLARATION

I ....., parent/guardian of ..... declare that the information provided in this application are correct to my knowledge and if found otherwise, shall abide by the decision of the management of Rainbow College. I understand that the purchase of this admissions form is non-refundable and that Rainbow College reserves the right to determine the appropriate year placement for my child/ward.

I agree to abide by the rules, regulations and the fee structure of the school.

SIGNATURE | DATE

ENCLOSURES (All documents are mandatory at the time of admission)

- BIRTH CERTIFICATE
- TRANSFER CERTIFICATE OR TRANSCRIPT
- VACCINATION CARD COPIES
- MEDICAL REPORT
- PASSPORT SIZE PHOTOS OF CHILD (2 Copies)

Note: Please staple all documents to the application form