



HOPEWELL KANIKWA NURSERY & PRIMARY SCHOOL

Kanikwa Village, Nkoma Parish, Namanyonyi Sub-County, Mbale City

Email: info@hopewellkanikwaps.sc.ug | Tel: +256 772 657705

PUPIL ADMISSION APPLICATION FORM

✦ INSTRUCTIONS TO APPLICANT:

- Please fill out this form in **CAPITAL LETTERS**.
- Attach a copy of the child's **birth certificate**.
- Submit the completed form to the **school office**.
- An **oral or written assessment** will be administered depending on the class level.

■ SECTION A: PUPIL DETAILS

Field	Information
Full Name of the Child	_____
Date of Birth (DD/MM/YYYY)	_____
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Desired Class of Entry	<input type="checkbox"/> Baby <input type="checkbox"/> Middle <input type="checkbox"/> Top <input type="checkbox"/> P.1 <input type="checkbox"/> P.2 <input type="checkbox"/> P.3 <input type="checkbox"/> P.4 <input type="checkbox"/> P.5 <input type="checkbox"/> P.6 <input type="checkbox"/> P.7
Current / Previous School (if any)	_____
Reason for Transfer (if applicable)	_____

👤👤👤 SECTION B: PARENT / GUARDIAN DETAILS

Field	Information
Full Name of Parent/Guardian	_____
Relationship to the Child	_____
Phone Number(s)	_____
Email Address	_____
Physical Address	_____



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SECTION C: PUPIL NEEDS

Please indicate whether your child requires the following:

Need	Yes	No
Boarding Facilities	<input type="checkbox"/>	<input type="checkbox"/>
Breakfast at School	<input type="checkbox"/>	<input type="checkbox"/>
Lunch at School	<input type="checkbox"/>	<input type="checkbox"/>
Learning Support / Special Needs	<input type="checkbox"/>	<input type="checkbox"/>

If yes, please describe:

SECTION D: ASSESSMENT INFORMATION

- Pupils applying for **Baby Class to Primary Three (P.3)** will undertake an **oral assessment**.
- Pupils applying for **Primary Four (P.4) to Primary Seven (P.7)** will take a **written examination** to determine class readiness and placement.

DECLARATION

I, _____, parent/guardian of the above-named child, declare that the information provided is true and correct to the best of my knowledge. I understand that admission to the school is subject to successful completion of the placement assessment and fulfillment of school requirements.

Signature of Parent/Guardian: _____

Date: _____



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ATTACHMENTS CHECKLIST

Please ensure the following documents are attached:

- Copy of Birth Certificate
- 2 Recent Passport Photographs
- Previous School Report (if applicable)