



MOMBASA BAPTIST HIGH SCHOOL

I.G.C.S.E CURRICULUM

P.O. BOX 90452, MOMBASA, KENYA

PHONE: 2491920/2493678

MOBILE: 0711 842233/0736985177

E-MAIL mombasa_baptist@ikenya.com

APPLICATION FORM NO: JOINING FORM:

Instructions for filling in this form.

1. Use CAPITAL letters in all blank spaces.
2. Fill all spaces.
3. Attach one (1) passport size photograph to the right.
4. Attach copies of previous School Reports.

Student's Name: _____

Class Completed: _____

Primary School Attended: _____

Date of Birth: _____ Age: _____ Sex: _____

Contact Address: _____ Phone: _____

Person living with in Mombasa: _____

Address: _____

Father's Name: _____

Occupation: _____ Phone: Work: _____

Mother's Name: _____ Address: _____

Occupation: _____ Phone: Work: _____

Brothers/Sisters attending/attended this school.

Name: _____ Form: _____ Adm.No: _____

Name: _____ Form: _____ Adm.No: _____

Who will pay your school fees: _____ Phone: _____

Address: _____ Phone: _____

Your Religion: _____

Last Secondary School attended: _____

Address: _____ Last form completed: _____ Year: _____

Reason for leaving the present school: _____

Signature

Date

Signature of parent/Guardian

Date