

AFFIX PASSPORT SIZE PHOTO OF THE STUDENT

	<u>ADMISSI</u>	IOIN FORIVI		
Form No: Date:				
ADMISSION NO:				
TSHS: 10,000	JL			
STUDENT'S PROFILE:				
Name of pupil (In capital lett	ers)			
Admission sought for KG		ACADEMIC	YEAR:	
DATE OF BIRTH DD	/ MM/YYYY			
PLACE OF BIRTH	CITY			
NATIONALITY	RELIGION		GENDER:	
ESIDENTIAL ADDRESS				
ESIDENTIAL ADDRESS				
VARD	DISTRICT		REGION	
VARDOUNTRY	DISTRICTF	HOUSE NO	REGION	
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ARENTS' / GUARDIAN					
Mother' s Photo		Fath Pho			Guardian's Photo
ignature	Si	gnature			Signature
Particulars	Mother		F	ather	Guardian
Name					
Qualification					
Occupation					
Organization					
Designation					
Mobile Number					
NIDA Number					
Email					
Annual income (Tshs.)					
Office Contact Number					
(if any)					
SIBLING'S PROFILE					
S.No. Name of the	e Sibling	Class		Nam	ne of the School

1.

2.

3.

Terms & Conditions

- 1. Admission form must be filled in with <u>due care</u> by the parents/guardian. Any change in residential address, mobile numbers, etc. should be informed to the school in writing duly signed by parents / guardian (changes would not be accepted over phone, SMS).
- 2. Original transfer certificate from previous school and proof of education of the child (photocopy of mark sheet/report card) should be submitted before the academic year begins.
- 3. The student is expected to adhere to all guidelines issued by the management of the school in advance and during the year. The student is expected to attend classes on time and to be present on a regular basis all absences will be noted down and reported. The student is expected to do the homework that is set on a regular basis. Repeated failure to do so will be reported and in extreme cases may involve other sanctions.
- 4. The management committee reserves the right of admission to any child without giving any reason whatsoever.

DECLARATION

(To be signed by Parent/Guardian at the time of admission only)

- 1. We acknowledge that this application does not automatically admit our child to **POPATLAL TANGA ENGLISH MEDIUM PRE AND PRIMARY SCHOOL** AND **POPATLAL TANGA ENGLISH MEDIUM PRE AND PRIMARY SCHOOL** reserves the right to make a final decision with respect to admission.
- We acknowledge that, should this application be accepted, our child and we (her/his parents or guardians) undertake to abide by the policies and regulations of POPATLAL TANGA ENGLISH MEDIUM PRE AND PRIMARY SCHOOL and we understand that in serious instances of breach like, damage to school property, bodily harm to another student/teacher, our child may be asked to leave the school.
- 3. We acknowledge that, upon acceptance of this application we agree to pay the total fee as applicable and abide by the billing options outlined in the fee schedule as informed by the school from time to time.
- 4. We acknowledge that the school will take reasonable care and exercise due diligence within its premises and during school activities, it will bear no responsibility should the applicant exercise any reckless and/or careless behaviour that may endanger her/his safety and others around and as such cause harm or injury to herself/himself and others.
- 5. We declare that all previous medical and psychological histories are correctly reported on the admission form.
- 6. WE AGREE THAT UPON THE NOTICE (WHETHER VIA SMS/ PHONECALL / SCHEDULED NOTICES) OF A

 PARENT-TEACHER MEETING WE WILL ATTEND ON TIME WITHOUT FAIL AND COMPLY WITH THE

 REQUIREMENTS OF THE ADMINISTRATION. THIS INCLUDES ANY OTHER EMERGENCY (CHILD SPECIFIC)

 MEETING FROM THE SCHOOL AT ANY TIME OR ANY DAY OF THE WEEK.
- 7. On leaving the school, our child shall return any school property they might have borrowed during their time of study in the school
- 8. We agree that **POPATLAL TANGA ENGLISH MEDIUM PRE AND PRIMARY SCHOOL** reserves the right of refunding/not refunding the tuition fee (or any such fee which is paid at the time of admission), in case the child leaves/gets transferred during the course of the Academic Year

Documents Submitted

[] Photocopy of Birth Certificate (Attested)	[] Three latest passport size photographs of student
[] One latest passport size photograph of mother	[] One latest passport size photograph of father
[] Transfer Certificate (Original) (IF ANY)	[] Photocopy of NIDA card (of both parents/guardian)

FEE POLICY

Academic Fee Structure KG

Particulars	Payable	Amount
Term 1	At the time of admission	200,000 Tshs
Term 2	On or before 1st July	200,000 Tshs

Academic Fee Structure (babyclass/ playgroup)

Particulars	Payable	Amount
Term 1	At the time of admission	150,000 Tshs
Term 2	On or before 1st July	150,000 Tshs

- 1. All monetary dues should be cleared on or before the due dates failing which the school management is authorized to suspend the pupil if dues have not been paid.
- 2. Payment must be made at Diamond Trust Bank Tanga Branch, Account Number: 0119141001 ACCOUNT NAME: POPATLAL T. E. M. PRIMARY SCHOOL

FEE TERMS & CONDITIONS

- 1. The school fees for the student per annum will be Tshs 400,000 (300,000 for playgroup/babyclass) payable in two installment as shown on the fee structure above.
- 2. The student will not be allowed to commence his/her classes until the required fees have been paid.
- 3. T-shirts, Uniforms, Books and other accessories are mandatory for the students and must be paid for upon admission. (below is a table showing the breakdown of these other accessories.)

ACCESSORIES FEE STRUTURE (MANDATORY)

UNIFORM (2 pairs)	60,000 TSHS
T-SHIRTS	12,000 TSHS
SWEATERS	15,000 TSHS
TRACKSUITS	25,000 TSHS
SCHOOL DIARY	10,000 TSHS
FOOD (FOR 10 MONTHS) (20,000 per month)	200,000 TSHS
TRANSPORT (optional)	50,000 – 70,000 per month (as per route)

FOR OFFICE USE ONLY

Particulars	Amount	Receipt No.	Mode of Payment	Date of Payment	Remarks
Admission Fee					
Caution Deposit					
Accessories					
Term 1					
Term 2					
Total Applicable Fee					

I applied for admission of my wathe school.	father of/ mother of/ guardian of ard into class. I have read and accept the Terms & Co	
Parent's Signature	Principal	's Signature
	Official School stamp	
ACCEPTED		
EJECTED	Administrator's S	iignature

MEDICAL EXAMINATION FORM

To be completed by a registered medical officer

GENERAL APPEARANCE	
Height	
Weight	
Pulse rate	
Skin appearance	
Throat tonsils	
EARS	
Rt hearing	
Drum Membrane	
Lt hearing	
Drum Membrane	
EYES	
Rt. VA	
Lt. VA	
VDRL Reaction if + ve treatment	
Widal reaction if +ve treatment	
Hears sound	_
	Umbilicus
Any Deformation Yes/No	
If yes which part of the body	
Type of deformity	<u></u>
Hemoglobin	
Stool Routine examination	
Urinalysis and sediment microscopy _	
Treatment	
Treatment	
Any other observation elicited	
DECLARATION	
I, Dr of	has avamined
(student name) and	d conclude that the student is
Suitable [] / not suitable [] to attend.	d Conclude that the student is
Suitable [] / Hot Suitable [] to attellu.	
Signature	Date

Official stamp

FOR NURSERY SCHOOL For any additional information