



EARTH LINE ACADEMY

MOTTO: READERS TODAY LEADERS TOMORROW

☎ 08033366059, 08060866658, 08034590815

📍 Guava Road, Ung Dosa Kaduna. ✉ earthlineacademy@gmail.com

ADMISSION FORM

Application ID: _____

SECTION 1: STUDENT PERSONAL DETAILS

Full Name (Surname First): _____

Gender: Male ☐ Female ☐

Date of Birth: _____

State of Origin: _____

Local Government: _____

NIN: _____

SECTION 2: CONTACT INFORMATION

Residential Address: _____

Primary Contact Number: _____

Alternative Contact Number: _____

SECTION 4: CURRENT/PREVIOUS SCHOOL INFORMATION

Name of Current School: _____

School Address: _____

Current Class: _____

Reason for Leaving: _____

SECTION 7: MEDICAL & ADDITIONAL INFORMATION

Does the student have any known allergies? Yes ☐ No ☐

If yes, please specify and describe severity/reaction: _____

Does the student have any existing medical conditions or disabilities we should be aware of? Yes ☐ No ☐

If yes, please provide details (you may attach a specialist's report): _____

I/We give permission for the school nurse/medical staff to administer over-the-counter pain relief (e.g., Paracetamol/Ibuprofen) if required. Yes ☐ No ☐

SECTION 8: DECLARATION & CHECKLIST

Please attach the following documents with this application before submission:

- [] 2 recent passport-sized photograph of the student
- [] A copy of the student's birth certificate
- [] A copy of the student's NIN
- [] Copies of the last academic school reports
- [] Any relevant educational psychologist or medical reports

Declaration:

I/We _____ hereby declare that the information provided in this application form is true, accurate, and complete to the best of my/our knowledge. I/We understand that providing false information may invalidate this application and could lead to the withdrawal of any offer of a place.

Signature of Parent/Guardian: _____

Date: _____