



GOLDEN RIDGE HIGH SCHOOL

P.O.BOX 447, GEITA – MWANZA

http://www.goldenridge.sc.tz: Cell: +255-764940179/ 0754 502985

“Education for Liberation”

School Reference Number: GRHS/DSA/2016/_____

Admission Application Form (For Academic Year 2018/2019)

Congratulations on your decision to apply to Golden Ridge High School. You have made an important decision and will join many other scholars who have selected Golden Ridge High School for it's a-level education. Your decision ensures you will receive outstanding progress in your combination for your career and that you will have every opportunity to achieve the personal satisfaction that comes from your chosen career field.

Please help us process promptly and correctly by completing this form. Incomplete or incorrect information could delay the processing of your application. Please write clearly in BLOCK LETTERS. All applicants should include the following documents with the application form:

- Two recent passport photographs
- O-Level pass out certificate
- Transfer certificate from the last secondary school attended
- A non-refundable application fee of Tsh 15000 cover the costs of processing the application.

Please affix a recent passport-sized photograph here

Please tick the combination you are applying for

- | | | |
|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> EGM | <input type="checkbox"/> HGE | <input type="checkbox"/> PCM |
| <input type="checkbox"/> HGL | <input type="checkbox"/> HKL | <input type="checkbox"/> PCB |
| <input type="checkbox"/> HGK | <input type="checkbox"/> CBG | <input type="checkbox"/> PGM |

Admission Type:

Day Student ☐ Boarding Student ☐

A: Personal Particulars (as reflected on Birth Certificate)

Surname:	
First Name(s):	
Preferred Name:	Female <input type="checkbox"/> Male <input type="checkbox"/>
Date of Birth:	
Nationality:	
Religious Denomination:	
Contact Address:	
Contact Phone No. (Home)	(Mobile)

B: Additional Information on Applicant

	(Please indicate with an 'X')				
Applicant Living with	Both parent	Mother	Father	Guardian	Other
Parent(s) deceased	None	Mother	Father	Both	
Communication to	Both parent	Mother	Father		



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C: Academic Information

Schools attended (where applicable)	Period of time
Primary School Name:	
Secondary School Name:	

Form Four (4) Examination(C.S.E.E) Results

Subject		Pass Marks
1	Civics	
2	History	
3	Geography	
4	Kiswahili	
5	English	
6	Physics	
7	Chemistry	
8	Biology	
9	Basic Mathematics	
10	Commerce	
11	Book Keeping	
Division.....		Point.....

Applicant Declaration

I.....I hereby acknowledge that I have submitted all the relevant forms and declare that the information I have provided is true. I understand that any incomplete and false information will void my application

Signature of Applicant

D: Family Information

(i) Father Particulars

Name of Father:					
Contact Nos. (Home)		(Mobile)			
Physical Address				Religion	
Nationality					
Occupation Employer/ Self Employed					
Marital Status	Married <input type="checkbox"/>	Single <input type="checkbox"/>	Separated <input type="checkbox"/>	Living Together <input type="checkbox"/>	Widowed <input type="checkbox"/>

(ii) Mother's Particulars

Name of Mother:	
Contact Nos. (Home)	(Mobile)
Physical Address	Religion



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Nationality					
Occupation					
Employer/ Self Employed					
Marital Status	Married <input type="checkbox"/>	Single <input type="checkbox"/>	Separated <input type="checkbox"/>	Living Together <input type="checkbox"/>	Widowed <input type="checkbox"/>

(iii) Guardian's Particulars (if applicable)

Name of Guardian					
Contact Nos.					
(Home) (Mobile)					
Physical Address				Religion	
Nationality					
Occupation					
Employer/ Self Employed					
Marital Status	Married <input type="checkbox"/>	Single <input type="checkbox"/>	Separated <input type="checkbox"/>	Living Together <input type="checkbox"/>	Widowed <input type="checkbox"/>

E: Disability, Medical Condition or Behavioral Disorder

Does the student have a disability, medical condition or behavioral disorder which may affect his or her school performance? Yes No
If 'Yes', what is the nature of the disability?
Please indicate any special arrangements (e.g. wheelchair access) the student may require at school

F: NOTICE - Payment of School Fees

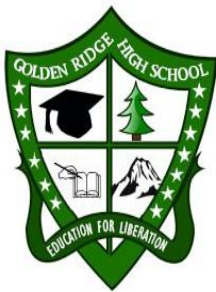
Please note that Golden Ridge High School is a private school by enrolling your son/daughter at the school, you are accepting an obligation to contribute financially towards his education					
Who will be responsible for the school fees?	Father		Mother		Other
			Father		Please furnish us with the info as requested in space provided below

G: Emergency Contact (Contact details of person/s to contact in case of emergency –when the parent is not available)

Surname:					
First Name(s):					
Relation to Student					
Home Phone				Cell No	
Business No				Fax No	
Physical Address					

H: Parent /Guardian Declaration

- I declare that all particulars furnished by me on this form are true and correct.
- In my personal capacity and on behalf of the applicant in my capacity as parent\guardian I hereby agree to:



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- ❖ abide by the School and Boarding School Rules attached to this document, also to be detached and kept for reference;
- ❖ acknowledge the authority of the Headmaster, the teacher, and student leaders;
- ❖ pay the stipulated school fees as agreed by the Parent Board at the Annual parent Meeting;
- ❖ notify the Headmaster, in writing, in the event of my child leaving the school (and/or Boarding House) at least 2 months' in advance or pay two months' fees in lieu of such notice. (This is for reasons other than disciplinary or financial default.)
- ❖ In addition, I undertake to return all books and other property belonging to the school;
- ❖ ensure that my son/daughter attends school regularly and, should my son be absent from school for any reason, inform the school of that writing ;
- ❖ Pay all costs incurred for damage done or losses caused by my son to school property.
- ❖ This is a fee-paying school and parents are expected to pay the fees in full according to arrangements agreed to on the Acceptance Form.

- ❖ Furthermore, I undertake to notify the school immediately of any change in my marital status, telephone numbers, residential or business address.

I (Mr./Mrs./Ms/Dr.....as parent/guardian I undertake to support the school fully and abide by its rules and regulation as contained in this application form, the student Code of conduct and any other as laid down by the Headmaster and the school governing Body.

Signature Father/Mother/Guardian

For Official Use

☐ Recommended

☐ Not Recommended

Reasons:
