

# TEEVES INTERNATIONAL SCHOOLS (SECONDARY)

UDOINYANG STREET, NSUKARA OFFOT,  
OFF NWANIBA ROAD, UYO, AKWA IBOM STATE.  
TEL: 08027413688, 09130642734  
Email: teevesuyo@gmail.com



## REGISTRATION /ADMISSION FORM

### SECTION A: STUDENT'S DATA

Surname:.....  
Other Names

Date of Birth..... Age:..... Gender: Male  Female

Name and Address of previous School(s) attended:.....  
.....  
.....

Reason(s) for Leaving:.....  
.....

Last Class in Previous School:..... Class for Admission:.....  
(Subject to satisfactory examination result)

### SECTION B: PARENT'S /GUARDIAN'S DATA

#### 1.Father

Name:.....  
(Please indicate title e.g.Mr,Mrs, Engr,Prof,Pastor,Dr,etc)

Occupation:.....

Office Address:.....

Residential Address:.....

Phone Number(s):..... Email:.....

Nationality:..... State of Origin:.....

L.G.A:..... Religion:.....

Denomination (if Christianity):..... Number of Children:.....

#### 2.Mother

Name:.....  
(Please indicate title e.g.Mr,Mrs, Engr,Prof,Pastor,Dr,etc)

Occupation:.....

Office Address:.....

Residential Address:.....

Phone Number(s):..... Email:.....

Nationality:..... State of Origin:.....

L.G.A:.....Religion:.....

Denomination (if Christianity):.....Number of Children:.....

**SECTION C: MEDICAL DATA**

Name of Family

Hospital:.....

Address:.....

Name of Family Doctor:.....Phone

Number:.....

Genotype:.....Blood

Group:.....

In case of emergency, should your ward be given any first aid treatment?

Yes  No

State any peculiarity or health issue you would want us to know.

**SECTION D: PICK UP DATA**

List the names of three people authorized to pick your ward.

1.).....

2.).....

3.).....

Attach one passport photograph of each authorized person.

Are you interested in our school bus service?.....

Kindly submit this form with the following:

1. Student's passport photograph (2)

**Photocopies of:**

2. Birth Certificate or Affidavit of Date of Birth

3. Last result in previous School or Transfer Certificate (If applicable)

4. Parent's Marriage Certificate



**SECTION E: ADDITIONAL INFORMATION**

How did you hear about Teeves International School?

<input type="checkbox"/> TIS Parent	<input type="checkbox"/> TIS Staff	<input type="checkbox"/> Signboard/Banners	<input type="checkbox"/> Media
<input type="checkbox"/> Website	<input type="checkbox"/> Facebook	<input type="checkbox"/> School Publication	<input type="checkbox"/> Other

**Reasons for applying to Teeves International School**

1.....

2.....

3.....

4.....

**SECTION F: PARENT'S STATEMENT OF CO-OPERATION/AGREEMENT**

I \_\_\_\_\_ believe that the school will guide and nurture my child / ward in love and according to biblical principles.

I confirm that all the admission information given the school about my child are correct.

I therefore grant permission that:

- 1) My child participates in all outdoor/co-curricular activities including excursion, symposium, quiz and sport competitions authorized by the school.
- 2) The school authorities will take any step necessary to obtain emergency care if warranted and the school will bill me for any expenses incurred.
- 3) My child will use the play facilities and participate in all the school activities.
- 4) My child will participate in all Christian religious activities.
- 5) We agree that photographs of our children can be taken and used for school records, for marketing and publicity such as on the website or in leaflets, yearbook etc.

Finally, I promise to abide by the school policies and their expectations from parents especially in paying fees promptly latest by the 2nd week of every term.

Fees not paid after this time will result in the child's withdrawal from attendance unless special arrangements are made with the school.

**Father/Guardian**

Name:.....

Signature:.....

Date:.....

**Mother/Guardian**

Name:.....

Signature:.....

Date:.....

**FOR OFFICIAL USE ONLY**

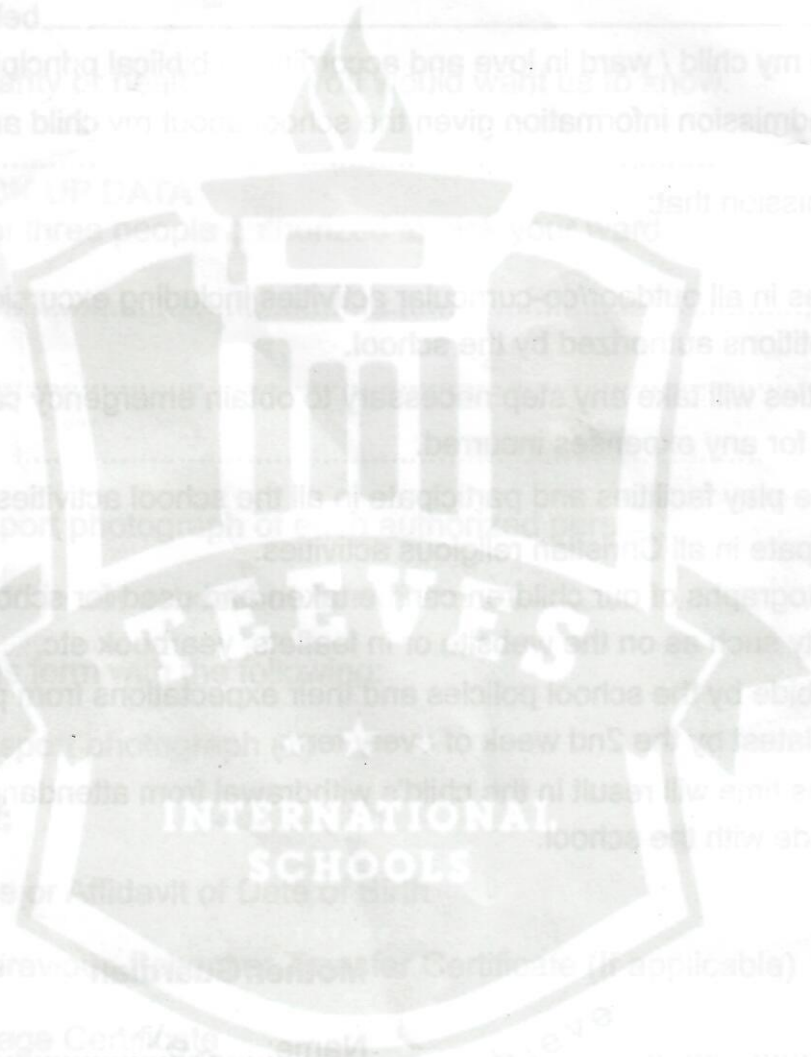
Admission No:.....

Age at Admission:.....

Date of Admission:.....

Admission Officer's Name:.....

Stamp / Signature:.....



**TEEVES INTERNATIONAL SCHOOLS**

*...learn, lead, achieve*

Udoinyang Street, Nsukara Offot,  
Off Nwaniba Road, Uyo, Akwa Ibom State.

Email: [teevesuyo@gmail.com](mailto:teevesuyo@gmail.com)

Tel: 08027413688, 09130642734

*TIS...making smart kids Smarter!*