

MERRYLAND HIGH SCHOOL – ENTEBBE



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0775 274 169

0772 514 825

0772 594 764

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Our Ref: MHS/ADM/2019

Liaison Office:

Plot 7 Market Street, Nakasero

Tel: 0392 897 002 / 0782 201 907

FORM TWO APPLICATION FORM - 2019

APPLICATION FORM

NOTES:

Attach a copy of your PLE, UCE result slip,
or a copy of your report card(s)
Scan a fully filled copy of this document and send
to our email address above.

2 passport size
photos must be
attached.

Student

2 passport size
photos must be
attached.

Parent/Guardian

Date: _____ Class applied for: _____ Serial No: _____

Surname _____ Other names _____

BLOCK LETTERS

Sex _____ Nationality _____ Religious denomination _____

Date of birth _____ / _____ / _____

NAME OF YOUR PRIMARY SCHOOL:

List your primary leaving examination results (attaché result slip)

MATH	ENG	SCI	SST	AGG	DIV

NAME OF YOUR PREVIOUS SCHOOL:

List your grades in Ordinary Level Examinations (attach report cards)

MATH	BIO	PHY	CHEM	ENG	HIST	GEOG	F. ART	CRE	COMP	COMM	AGRIC	LIT	LUG	T.D	OTHER	AGG	DIV

HOW DID YOU COME TO KNOW ABOUT THIS SCHOOL (tick the most suitable option)

- | | |
|--------------------------------|------------------|
| a) Parent/Family Member/Friend | d) Old students |
| b) Media/Newspapers/TV | e) Staff members |
| c) School catalogues | f) Website |

ANY HEALTH HANDCAP? (E.g. Lame, Deaf, etc.) _____

MEDICAL EXAMINATION REPORT

You are hereby requested to effect a thorough medical check up of your daughter / son and present a certified report on the reporting day.

Name:.....Class:.....

Home/Parent's telephone No:.....

1. Have you ever been admitted in any hospital before (Yes/No).....
If yes, give reasons:.....
Allergy to drugs / foods (tick where applicable).....
Give details.....
Asthmatic or history of asthma in family.....
Any hearing defect?.....
Heart problem?.....
Blood pressure?.....
Chest pain?.....
Hernia?.....
Seizure attack?.....
Blood sugar level?.....
2. Any other information about your health.....
General report:.....
Name of Doctor:.....
Signed Date:
3. Dentist's report:.....
Name of Doctor:.....
Signed Date:
4. Eyes specialist's report:.....
Name of Doctor:.....
Signed Date:

CAREERES:

List the careers you intend to pursue in order of priority,

(a).....(b).....(c).....

Sponsor (name): Mr. / MRs./ Ms./ Dr./ Pr./ Rev.

.....

Relationship:..... Occupation:.....

Place of work:..... Address:.....

Email:..... Mobile No:.....

Language spoken at home:..... Position in family.....ofchildren

Father's name:..... Father's occupation:.....

Address:..... Father's religion:.....

Email:..... Mobile No.:.....

Mother's name:..... Mother's occupation:.....

Address:..... Father's religion:.....

Email:..... Mobile No.:.....

Physical address (where exactly do you reside and with who?)

.....

Email:..... Tel. NO.:.....

Do you have any relative in this school? (Yes/No):.....

Staff (Name):..... Student Name:.....

DECLARATION:

I declare that all information filled is true.

Signed
Applicant **Parent/Guardian** **Date**

This applicant was introduced by? **Justine Winod Ongora - +256 777 786 997**

Thank you for Choosing the Tower of Excellence

MERRYLAND HIGH SCHOOL - ENTEBBE
CHECK LIST OF SCHOLASTIC AND PERSONAL REQUIREMENTS

NO.	ITEM	TICK
REQUIREMENTS BY THE SCHOOL		
1	Paid Up Bank slip or Bank Draft	
2	A signed Identity card from your former school	
3	Ten Rolls of toilet papers (Euro Silk Type)	
4	A ream of Photocopying Papers (Double A, Azhar Laser or Azhar Copier Super)	
5	A broom (inside)	
6	A broom (outside)	
7	A squeezer	
8	A brush	
9	Fully answered holiday work	
10	A Computer Practical Guide Book for S.4 & S.6 bought from school at 25,000/=	
11	History Work Book bought at 8,000/= for S.5 & S.6 (for those who offer history)	
12	A lab coat for S.5 and S.6 science bought from school at 30,000/= (Phy., Chem., Bio., F.N. & Agric)	
13	2 pass port photos for parent / guardian	
14	2 pass port photos for student	
15	A leaving certificate from your former school / UNEB pass slip	
16	Photocopy of your Birth Certificate	
17	Admission forms (fully completed)	
18	A medical form (one attached) dully filled by a qualified Medical Officer	
RECOMMENDED LIST FOR PERSONAL REQUIREMENTS PLEASE WHERE POSSIBLE LABEL THEM		
REQUIREMENTS BY THE ACADEMIC OFFICE		
1	All notes books dully signed by the parent	
2	Drawing books for fine art or technical drawing	
3	Fine Art (Coloured Pencils, "Super Writers", White Manila papers, Compo pens, Art pencils, Acron colours, Oil Pastels, Drawing Boards, Painting Brushes "Art Brushes"	
4	Graph Books for use during various subjects	
5	Foods and Nutrition students S.3 – S.6 (Aprons, Head gear, Centre Table Piece)	
6	Pens, Geometry Set, Pencils	
7	Calculator	
8	A dictionary	
9	An Atlas (Uganda Secondary School Atlas NCDC, Uganda Macmillan)	
10	At least one map extract for personal use (Geography students S.3 – S.6) at Comm House	
REQUIREMENTS IN DORMITORY		
1	A strong lockable box / suit case	
2	Bathing soap	
3	A bathing towel	
4	A pair of bathroom slippers	
5	Two bars of washing soap	
6	Toothpaste	
7	Tooth brush (at least three)	
8	A table spoon / fork	
9	A vacuum flask	
10	An umbrella	
11	A blanket	
12	A mosquito net	
13	A mattress and pillow	
14	A pair of bed sheets	
15	Stockings	
16	A pair of pajamas / night dress to sleep in	
17	A pair of black closed shoes for use in class	
18	A pair of open shoes during preps	
19	Canvas shoes for sports	
20	Shoe polish and shoe brush	
21	Two (2) pairs of black skirts / trousers	
22	Two (2) pairs of white shirts (short sleeved)	