

**BUKURA EDUCATIONAL COMPLEX****P.O BOX 58 – 50105****TEL: 0714352134 BUKURA**Email: [bukuracomplex@gmail.com](mailto:bukuracomplex@gmail.com) Website: [www.bukuraeducationalcomplexcbo.com](http://www.bukuraeducationalcomplexcbo.com)

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## NEMIS RECORD FORM

Dear parent, Kindly fill in the information below correctly.

### PUPIL'S RECORDS

Surname: .....  
First Name: .....  
Other Name: .....  
Birth Certificate Entry No: .....  
DOB(Month/Date/Year): .....  
Grade: .....  
Special Medical Condition: .....

### CONTACT DETAILS

Home County: .....  
Home Sub-County: .....  
Postal Address: .....

### MOTHER'S DETAILS

ID NO: .....  
Name: .....  
Email: .....  
Phone number: .....

### FATHER'S DETAILS

ID NO: .....  
Name: .....  
Email: .....  
Phone number: .....

### GUARDIAN'S DETAILS (IF AVAILABLE)

ID NO: .....  
Name: .....  
Email: .....  
Phone number: .....