FORTCODE COLLEGE

9 Wretham Road, Mt Pleasant
Phone: +263 772 237 329
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Fortcode College

APPLICATION FORM

Please fill in the form properly by completing all relevant fields, sign and date
- Carefully read and agree to all terms and conditions
- Attach Two passport sized photos, copy of original birth certificate, copy of passport, previous school report if available

STUDENT INFORMATION

Surname: _____
First Name: _____
Also known as: _____
Date of birth: (DD/MM/YY)_____
Drug allergy if any: _____
Food Allergy: _____

Street Address: _____
Suburb: _____
City/ Country: _____
Gender: M ☐   F ☐
Family Doctor's Name: _____
Conduct numbers: _____

EDUCATIONAL DATA

Name of school last attended: _____

Latest school year Attended (Grade/Form): _____

School address: _____

Class being applied for: _____

PARENT/GUARDIAN INFORMATION

Mother's Full name: _____
Cell phone: _____
Business phone: _____
E-mail address: _____

Mailing Address: _____
Occupation: _____
Employer: _____
Business Address: _____

Father's Full name: _____
Cell phone: _____
Business phone: _____
E-mail address: _____

Mailing Address: _____
Occupation: _____
Employer: _____
Business Address: _____

Guardian's Full name: _____
Cell phone: _____
Business phone: _____
E-mail address: _____

Mailing Address: _____
Occupation: _____
Employer: _____
Business Address: _____

Do you have siblings that are currently enrolled in Fortcode College   Yes : _____   No: _____
Name: _____   Form _____

I hereby certify that I have read and understood all instructions and procedures concerning this application. Furthermore, I also certify that all information supplied herein are complete and accurate. I fully understand that all documents submitted in support of this application the property of Fortcode College and will therefore not be the applicant.

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Signature of Parent or Guardian   Date

For office use:
Admitted into (Class)_____   Admission number_____Date: _____

Approved by: _____

Signed by: _____

Deposit: $ _____

Receipt No: _____

Director's signature: _____

Date: _____