



Registration Form

Use this form to start the process of applying for a place at St. Lucie Kiriri. We will get in touch to arrange a tour or a chat with the headteacher.

Student Details

Please provide your details so that we can contact you about your enquiry.

Full Names: _____
(As it appears on birth certificate)

Mailing Address: P.O. BOX _____ Code _____ Town/City _____

Nationality: _____ Passport Number: _____ Date Of Expiry: _____

Date Of Birth: _____
(dd/mm/yyyy)

Does the applicant have any close relatives studying in the school? **YES / NO**

If yes: Name: _____ Form/Year: _____ Relation: _____

Name: _____ Form/Year: _____ Relation: _____

Name: _____ Form/Year: _____ Relation: _____

Parent/Guardian Details

a.) Father's Name: _____

Mailing Address: P.O. BOX _____ Code _____ Town/City _____

Home Telephone Number: _____ Mobile Phone Number: _____

Email Address: _____

a.) Mother's Name: _____

Mailing Address: P.O. BOX _____ Code _____ Town/City _____

Home Telephone Number: _____ Mobile Phone Number: _____

Email Address: _____

a.) Guardian's Name: _____

Mailing Address: P.O. BOX _____ Code _____ Town/City _____

Home Telephone Number: _____ Mobile Phone Number: _____

Email Address: _____

Occupational Details

a.) Father:

Employer: _____ Occupation: _____

Business Address: _____

Telephone: _____ Mobile Phone Number: _____

a.) Mother:

Employer: _____ Occupation: _____

Business Address: _____

Telephone: _____ Mobile Phone Number: _____

a.) Guardian:

Employer: _____ Occupation: _____

Business Address: _____

Telephone: _____ Mobile Phone Number: _____

Please indicate sources of funding for school fees:

Direct Company Payment Reimbursement By Company Self Other: _____

Education: (previous Schooling History):

Name and address of current/most recent school: _____

Parents and students are required to read the following school regulations before signing this form indicating their acceptance of the same.

1. School fees are due on or before the first day of term or upon entry if the date is later.
2. At least one term's notice, in writing, of the intention to remove a student must be given.
3. If upon entry, it is found that any student has committed a grave offence or has been willfully or persistently disobedient or lazy, or if the student is found to be academically completely unsuited to the course she is following, then the school may remove or expel such a student or request the parent to remove her. The school management reserves the right to require the immediate withdrawal of any student.
4. All students are required to wear the school uniform tidily. The uniform must be clean and permanently labelled.
5. Students must read the school rules and abide by them.
6. Absence from school will require a letter of explanation from a parent or guardian, to be submitted on the day of the student's return to school.
7. Non-participation in sports for a medical reason will require a doctor's note.
8. The parent/s or guardian/s of the student will, at all times, keep the school indemnified against all actions, claims, proceedings, costs and expenses in respect of damages to property belonging to the student arising out of any school activity or transport facility provided or arranged by the school and/or while the student is under supervision both within and out of Nairobi.
9. I consent to participation in interviews and the taking of photographs or films of the student for promotional/educational purposes.

I have completed all the sections of this application form. I have read and fully understand that my child's place at St. Lucie Kiriri is dependent upon their adherence to the school conduct sheet.

Signed: _____ Date: _____

CHECKLIST

Please check that you have submitted the following with this form, and return to the school:

1. A leaving certificate or letter from the previous school (if applicable).
2. A copy of your child's birth certificate and passport.
3. A completed medical form.
4. A non-refundable registration fee.
5. Four passport sized photographs.

OFFICE USE ONLY:

I have interviewed the student and found her suitable for a place in Year _____ at St. Lucie Kiriri.

Starting term: January / April / September in the Calendar Year: 20_____. Reporting date: _____

Name of interviewer: _____ Signature: _____ Date: _____

Accounts Office:



Registration Fee Paid	
Caution Money Paid	
Application Fee Paid	

Name of Accounts Officer: _____ Signature: _____ Date: _____

Students With Special Needs

Whilst catering for mainstream children with SEN (Special Educational Needs) and EAL (English as an Additional Language) requirements, **St. Lucie Kiriri does not have the resources to cater for children with severe learning disabilities, nor for children with significant physical disabilities.**

Children whose needs are borderline in this regard may be admitted only after consultation with parents regarding:

- The limits to the support available at the school.
- Any specified school requirements are made clear, such as the need for a full-time helper for the child.
- Any possible time frame limitations to the child staying at St. Lucie Kiriri.

Please Note: St. Lucie Kiriri buildings are not wheelchair friendly. Therefore applicants with mobility limitations will only be admitted to St. Lucie Kiriri if individual circumstances do not hinder movement around the campus.

Student Background Information Profile.

Name of Child: _____ Entering Year: _____