



NEW SEMERIDIAN COLLEGE

NURSERY, PRIMARY & SECONDARY

Zone A, Behind Deeper Life Bible Church, Area 'B' Last Nyanya, FCT Abuja



ADMISSION FORM

Affix
Passport
Photograph

1. Name: _____
2. Address: _____
3. Date of Birth: _____
4. Sex: Male ☐ Male ☐ Age ☐
5. Religion: _____
6. State of Origin: _____ L.G.A. _____
7. Nationality: _____
8. Disability: (Yes/No) _____ (If yes, please describe) _____
9. Name of Sponsor (Parent/Guardian): _____
10. Residential Address: _____
11. Occupation: _____
12. Tel: _____ Email: _____
13. Signature: _____ Date: _____
14. Tick where applicable: Pre-Nursery ☐ Nursery ☐ Primary ☐ Sec ☐
15. Relationship with Pupil/Student: _____
16. Please notify the school promptly in case of change in address

NURSERY/PRIMARY/SEC. ATTENDED WITH DATE

NAME OF SCHOOL	FROM	TO

I _____ of _____ Parent/Guardian of _____
hereby accept to abide by the conditions set in the
prospectus and will assist the school where possible in furtherance of the child's education if
admitted.

FOR OFFICE USE ONLY

Date Issued: _____ date received _____

Registration No: _____ admitted: _____ not admitted: _____

Admission Office/Sign

+2347067654337, +2348064556285

semeridianms@gmail.com

Zone A, Behind Deeper Life Church,
Area 'B' Last Road, Nyanya P.C.T Abuja.