



St Johns Junior School

PO BOX 775 ARUA - (U)

Ojibari Village, Ayaa Parish, Ajia Sub County, Arua District
+256772-363603 stjohnsjs@gmail.com www.stjohns.ac.ug

Passion for Excellence

APPLICATION FORM / BIO DATA

1. CHILD'S INFORMATION.

(SURNAME)

(FIRST NAME)

(OTHER NAME(S))

GENDER: Male ☐

Female ☐

RELIGION: -----

DATE OF BIRTH ____/____/____ (Copy of Birth Certificate Optional)

ADDRESS: -----

NATIONALITY: -----

2. FAMILY INFORMATION (PARENTS/GUARDIANS)

RELATIONSHIP	
NAME	
TELEPHONE CONTACT	
ADDRESS	
EMAIL	

Are any siblings currently attending this school? YES ☐ NO ☐

If "YES" Please indicate

Name of sibling

Class

1. -----
2. -----
3. -----

3. DECLARATION BY APPLICANT

I----- of-----

(Name of parent/Guardian)

(Name of Child)

Hereby declare that the above information is true and correct and I acknowledge that: A declaration of any false information, failure to provide the documents requested, or failure to satisfy the stated criteria for acceptance may disqualify my child from admission to this school.

(NAME OF APPLICANT IN BLOCK LETTERS) (SIGNATURE) (DATE)