



DIVINE INFINITY COLLEGE

#117, Okota Road, Okota Isolo, Lagos, Near Cele Bus/Stop.

Tel: 08023142788, 09037543978

E-mail: dinfinitycollege@gmail.com

Application for Admission

please complete this form clearly in BLOCK CAPITALS

1. STUDENT'S DETAILS

Surname, first and other names (s) of student (as registered on birth certificate)

surname first name other name(s)

Date of birth _____ Place of birth _____ Nationality _____
DD/MM/YYYY

Home Address _____

Gender ☐ M ☐ F

Home language _____ First language _____ Religion _____

Schools Attended

1. Name _____ Year _____ City/ Country _____ class _____

2.. Name _____ Year _____ City/ Country _____ class _____

3.. Name _____ Year _____ City/ Country _____ class _____

Class on Admission _____ Age _____

2. FATHER'S DETAILS

☐ Billing ☐ Letters

Name _____ Nationality _____

Tel _____

Home Address _____

Occupation _____ Email _____

Company Name & Address _____

3. MOTHER'S DETAILS

☐ Billing ☐ Letters

Name _____ Nationality _____

Tel _____

Home Address _____

Occupation _____ Email _____

Company Name & Address _____

Childs lives with ☐ Both parents ☐ Mother ☐ Father ☐ Guardian

4. GUARDIAN DETAILS

☐ Billing ☐ Letters

Name _____ Nationality _____

Relationship to student _____ Tel _____

Home Address _____

Occupation _____ Email _____
Company Name &Address _____

5. ADDITIONAL DETAILS

Links to the school ☐ Old students ☐ Current students ☐ Staff ☐ Family member ☐ social connetions
☐ Other(Kindly specify) _____

How did you hear about us? ☐ Television ☐ Radio ☐ Exhibition ☐ Social Media ☐ Print
☐ Other(Kindly specify) _____ ☐ Friend/Family _____
(Pls indicate if infinity's parent)

What are the reason(s) you have chosen Divine infinity College? _____

Other schools being considered? _____

Parent's instruction for medical care in case of emergency _____

Additional information can be attached to this application form on a separate sheet of paper. Please inform us of any special interest of your child and if he/she has any known medical condition health issues or allergies which you would like us to be aware of.

NOTE

- Please attach a photocopy of the applicant's birth certificate and character testimonial from your child's current school, the last academic report and 2 passport photographs.
- All fees are non refundable & transferable.

Divine Infinity College shall ensure that our school environment is conducive for the welfare and education of children in our care. Every action and decision taken by the school will be made in consideration of what is in the child's best interest and relevant to local and international policies. The school adopts a zero tolerance policy for any act of child abuse, violence, discrimination and bullying.

Before signing the enrolment form, please read the clauses that are highlighted on the declaration carefully.

To the best of my knowledge, the details on this form are correct.

I Mr/Mrs _____ parent/guardian of _____

Understand that the age group of my child should be within that stipulated by the school policy and that the application fee is non-refundable.

Signature _____ Date _____ Tel _____

6. OFFICIAL USE

Text result _____ Comments _____

Recommendation _____