

# MBONEA SECONDARY SCHOOL

## Student Application Form

Full Name: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

Gender (Male/Female): \_\_\_\_\_

Nationality: \_\_\_\_\_

Home Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Contact: \_\_\_\_\_

Current School: \_\_\_\_\_

Class/Grade Applying For: \_\_\_\_\_

Preferred Subjects (If any): \_\_\_\_\_

Does the student have any health conditions? If yes, specify: \_\_\_\_\_

Why do you want to join Mbonea Secondary School? (Short Answer): \_\_\_\_\_