



JAFFERY ACADEMY

Nursery | Junior | Senior

SENIOR SECTION, YEAR 7 - 10 APPLICATION FORM

Attach photo
here.

Please complete in BLOCK letters

APPLICANT DETAILS

NAME OF APPLICANT.....

DATE OF BIRTH.....GENDER.....COMMUNITY.....

CITIZENSHIP..... RELIGION.....

SCHOOL PRESENTLY STUDYING INCLASS

APPLICATION FOR YEAR *(Please attach copy of last school report)*

PARENT/GUARDIAN'S DETAILS

FULL NAME OF FATHER/GUARDIAN
(First name) (Surname)

ADDRESS: P.O.BOX.....

PHYSICAL HOME ADDRESS.....

ALTERNATE CONTACT ADDRESS.....

MOBILE NO. OF FATHER:I.D/ PASSPORT NUMBER.....

FATHER'S EMAIL ADDRESS:

OCCUPATION: FATHER.....

BUSINESS/EMPLOYER'S NAME & ADDRESS:
.....

CITIZENSHIP: FATHER.....



JAFFERY ACADEMY

Nursery | Junior | Senior

FULL NAME OF MOTHER/GUARDIAN
(First name) (Surname)

ADDRESS: P.O.BOX.....

PHYSICAL HOME ADDRESS.....

ALTERNATE CONTACT ADDRESS.....

MOBILE NO. OF MOTHER:I.D/ PASSPORT NUMBER.....

MOTHER'S EMAIL ADDRESS:

OCCUPATION: MOTHER.....

BUSINESS/EMPLOYER'S NAME & ADDRESS:
.....

CITIZENSHIP: MOTHER.....

THE SCHOOL HAS AN ACTIVE **TEXT MESSAGE SERVICE**.

STATE THE ONE MOBILE NUMBER YOU WOULD PREFER SCHOOL MESSAGES BE SENT TO **MOBILE NUMBER**

SHOULD THERE BE ANY CHANGE OF PHONE NUMBER, THE SCHOOL SHOULD BE INFORMED IMMEDIATELY.

OTHER INFORMATION

DETAILS OF ANY OTHER CHILDREN PRESENTLY STUDYING AT JAFFERY ACADEMY

1. NAME:CLASS
2. NAME:CLASS
3. NAME:CLASS
4. NAME:CLASS
5. NAME:CLASS



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Nursery | Junior | Senior

Please give details of any medical condition and/or physical disability the school should be aware of:

.....
.....

Please give the below information in case of a medical emergency:

Preferred hospital to be taken to:.....

Doctor to be alerted: -Name.....Phone:.....

Please return this form together with:

- Two passport sized photographs
- A copy of your child's birth certificate
- Leaving certificate from your child's current school.
- Last school report.
- Copies of any certificates/awards/records of achievements to aid your child's application
- Parents/Guardians ID /passport copy
- Certificate of incorporation/Pin (if fee payment is payable by company)

FOR OFFICIAL USE ONLY

Entrance Examination Date

Results: Mathematics..... **English**.....

Head of School's recommendation.....

Application Approved/Not Approved **Date**.....

Invoice No **Caution fee Receipt No**

Admission No:



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Nursery | Junior | Senior

RULES, REGULATIONS AND CONDITIONS

(Please read carefully)

1. Pupils must either be Kenya citizens or certified residents of Kenya. Please attach photocopies of relevant documents as evidence. In case of non-Kenyans, a **“Pupils pass” is to be submitted before the admission is confirmed.**
2. Students are expected to attend school each day during the official school hours. They should arrive in school before the morning bell which rings at 7.45 a.m. The school timings are:
Monday – Thursday: 7:40 a.m. – 3.30 pm.
Friday: 7:40 a.m. – 12:00 noon. Sports: 2:30 p.m. – 3:30 p.m.
3. Fees should be paid in advance by the end of the second week of each term. Fees once paid are **non-refundable and non-transferable.** **Caution fees** are **refundable** without interest, when the child leaves at any level subject to payment of all chargeable penalties. A non-refundable admission fee must be paid together with the tuition fee for the first term. The Board reserves the right to revise the fees as and when found necessary. Bank slips must be brought to the accounts office immediately.
4. In case of arrears, the school reserves a right to follow up on the collection of the outstanding fees via a debt enforcement agency and/or referral to the Credit Reference Bureau. All such debt enforcement costs shall be borne by the parent/guardian.
5. A full term’s notice is required in writing for a withdrawal of a child from the school. Failure to do this will necessitate payment of one term’s fee in lieu of notice and caution money will not be refunded.
6. If your child does not report to school at the commencement of a new term or in the course of a term and we have not received any notification from you for a period of two weeks, your child’s name will be removed from the class list and the space given to another applicant.
7. Absence from School will require a letter of explanation from a parent or guardian. Should it be observed that there is a trend of frequent late coming and absenteeism from classes, the Academy reserves the right to reconsider your son/daughter’s admissibility at the School. Students must have an attendance of ninety percent, 90%, in a year for them to be promoted to the next class.
8. Parents are encouraged to keep in touch with teachers concerning their child’s progress via prior appointments.
9. Transition from class to class is automatic every September except in exceptional circumstances where it is felt that a child’s progress academically is not satisfactory enough to let him/her move up or the attendance is below 90% as indicated in clause 7 above.
10. The school’s code of conduct & its rules and regulations will be given to your child when he/she joins school.



JAFFERY ACADEMY

Nursery | Junior | Senior

11. Students are not allowed to bring cars to school.
12. No student should be found in possession of cell phones in school. The same will be confiscated and not returned until the end of the term. Any cell phones brought to school should be deposited with the secretary or class teacher. Use of cell phones is strictly prohibited in the school compound.
13. Neither the K.S.I. Education Board nor other employees/agent shall be responsible for any accident (and all the consequences arising thereof) within or outside the school premises, including during sporting activities, on trips & visits within or outside Mombasa, or when using any means of transport within the school premises during or outside school hours.
14. Should pupils meet with an accident or mishap and be injured at any time, their Parents/Guardians hereby authorize the Head teacher and/or the teachers and/or other employees/agents to give or arrange to give medical/surgical treatment/s as regarded appropriate and necessary by them under such circumstances. Parents/ Guardians also hereby absolve the school from all consequences arising from accidents/mishaps and also hereby undertake to be responsible for all the resulting expenses incurred.
15. Neither the Board nor the teachers nor other employees/agents shall be responsible for any loss or damage to pupil's belongings whether in or outside the school premises.
16. For preventive measures, the Board reserves the right to institute periodical medical check-ups of any or all pupils. The Parent/Guardian hereby authorizes the Board to carry out such check-ups and accepts to pay for any costs and arranges for necessary treatment to be given to their child/ward as recommended in the medical report.
17. If your child is constantly involved in undisciplined acts and has been issued with several verbal and written warnings, the Academy reserves the right to terminate your child's stay at the Academy.
18. Any student found guilty of gross misbehaviour, violent conduct, posing a threat to the safety and security of other students, teachers and the school environment, in breach of the school values and ethos, subordination or damaging school property, will be suspended/ expelled and his/ her parents/guardians shall be required to pay the cost of any repairs/ replacement.
19. Maqna is a part of the uniform for girls. Pupils must be in their uniforms at school and while representing the school at functions held outside the school. Kindly note, during the course of your daughter's study at the Academy, we will not accept a doctor's letter informing us that your daughter is unable to wear the maqna.
20. **Signing of this application form and/ or admission letter bearing the above terms by Parents/ Guardians (or other acting on their behalf) will be taken as their acceptance of these terms in the event of enrolment of their son/ daughter/ ward in the school.**



JAFFERY ACADEMY

Nursery | Junior | Senior

DECLARATION

I declare that the above details are true and correct in every respect. I have read and understood the rules, regulations and conditions governing the admission and agree to abide by them.

Father's Signature..... **Date**.....

Mother's Signature..... **Date**.....

Personal referees.

Referee 1

NAME:.....

PHONE NO:.....

COMPANY:.....

DESIGNATION:.....

Referee 2

NAME:.....

PHONE NO:.....

COMPANY:.....

DESIGNATION:.....

Below trace a Map of your place of residence.