



Lead City High School

No 4, Osuntoki Street, Jericho GRA, P.O. Box 30678 Secretariat
Ibadan, Oyo State, Nigeria
Tel: (02)7510684-5, 080 23470782, 080 36694838
E-mail: leadcityhigh@yahoo.com

*Applicant's
Photograph
Duly Signed*

Entrance Examination Form

Application for Admission into J.S.S. /S.S.S. Class Session
(Indicate the Class in the box provided)

A. Personal Information

Form No.

- Surname: Other Names:
- Sex: Boarding/Day:
- Date of Birth: Nationality: State: Home Town:
- Language: Religion:
- Physical Peculiarity:
- Recent Schools Attended with Date(s) (a)
(b)
- Present Class:
- Medical History:** Please give details of physical defects or incapacities, allergies, serious illness, bed-wetting or other such matters about which the school ought to know:
.....
.....
- Address of Child's Medical Doctor in an Emergency: Phone No.

B. Information on Parents/Guardians

- Father or Mother/Guardian's Name(s)
- Profession(s)
- a. Home Address
- b. Telephone including GSM
- c. E-mail Address
- Postal Address
- Signature of Parent/Guardian
- Head Teacher's Signature and School Stamp
- Please tick examination centre of choice (i) Ibadan (ii) Lagos (iii) Others

C. For Internal Use Only

- Exam Scores: Interview Scores: Total:
- Remarks:
- Class Admitted into if Successful:
- Principal's Signature:

Lead City High School

Examination No.
Examination Identification Slip

*Applicant's
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Please detach and bring to the Examination Hall

Candidate's Name

Centre Allocated:

Candidate should bring along his/her receipt, pencil, biro, and eraser for the examination