MINISTRY OF EDUCATION
DEPARTMENT OF EDUCATION – GEORGETOWN
APPLICATION FOR APPEALS - ADMISSION TO PRIMARY SCHOOL 2016

TO BE COMPLETED BY PARENT OR GUARDIAN

1. Full Name of Pupil: .....
2. Home Address: .....
3. Email Address: .....
4. Name of Parent / Guardian: .....
5. National Identification Number: .....
6. Telephone No. Home: .....
   Work: .....
   Cell: .....
7. Place of Work: .....
8. Nursery School Attended: .....
9. School Allocated: .....
10. School Requested : .....
11. Reason (s)for Appeal: .....

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Signature of Parent / Guardian: ..... Date: .....

Information Verified by: ..... Date: .....

FOR OFFICIAL USE ONLY

Approved: ..... School Awarded: .....

Not Approved: .....

....

Placement Officer Date

NB:

1. **Forms to be returned to the office of the Principal Education Officer – Georgetown by 15th July, 2016**
2. **Response to appeal will be mailed to the applicant by July 29, 2016**

MINISTRY OF EDUCATION
DEPARTMENT OF EDUCATION – GEORGETOWN
APPLICATION FOR APPEALS - ADMISSION TO NURSERY SCHOOL 2016

TO BE COMPLETED BY PARENT OR GUARDIAN

1. Full Name of Pupil: .....
2. Home Address: .....
3. Email Address: .....
4. Name of Parent / Guardian: .....
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6. Telephone No. Home: .....
   Work: .....
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