



# SUCCESS BILINGUAL COLLEGE (SUBICO) - DSCHANG

MOTTO: Technology - Innovation - Development



## Admission Application Form

### A. STUDENT INFORMATION

ACADEMIC YEAR: 20\_\_\_\_/20\_\_\_\_

1. Name: \_\_\_\_\_
2. Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ (put a tick ✓)
3. Date of Birth: \_\_\_\_\_
4. Place of Birth: \_\_\_\_\_
5. Quarter of Residence: \_\_\_\_\_
6. Region of Origin: \_\_\_\_\_ Nationality \_\_\_\_\_
7. Which sub-section are you applying for? \_\_\_\_\_
8. Previous class: \_\_\_\_\_ Class now applying for: \_\_\_\_\_

### B. PARENT OR GUARDIAN INFORMATION

1. Name: \_\_\_\_\_
2. Present occupation/profession: \_\_\_\_\_
3. NIC No: \_\_\_\_\_ Issued on: \_\_\_\_\_ at: \_\_\_\_\_
4. First language of instruction: English \_\_\_\_\_ French \_\_\_\_\_ (put a tick ✓)
5. Region of origin: \_\_\_\_\_ Country: \_\_\_\_\_
6. Telephone: \_\_\_\_\_
7. Email address: \_\_\_\_\_

### C. STUDENT PICK UP INFORMATION (This information is required for parents who want to authorize someone to pick up their child(ren) from school).

1. **Name of 1<sup>st</sup> authorized person:** \_\_\_\_\_  
Gender: \_\_\_\_\_ NIC No: \_\_\_\_\_ Issued on: \_\_\_\_\_ At: \_\_\_\_\_  
Occupation/Profession: \_\_\_\_\_ Telephone: \_\_\_\_\_
2. **Name of 2<sup>nd</sup> authorized person:** \_\_\_\_\_  
Gender: \_\_\_\_\_ NIC No: \_\_\_\_\_ Issued on: \_\_\_\_\_ At: \_\_\_\_\_  
Occupation/Profession: \_\_\_\_\_ Telephone: \_\_\_\_\_

### D. FINANCIAL ENGAGEMENT:

I, the undersigned, promise to pay all the fees of the student registered in Success Bilingual College – Dschang, on or before the 31st of January each year. Failure to do so, the school has the right to send away the affected student until the fees are paid in full.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_