



THE
16 PLUS
SCHOOL
(SIXTH FORM)

The 16 Plus School (Sixth Form)

REGISTRATION FORM

No: _____

Please carefully read and complete this form. Kindly return the completed form with a non-refundable deposit of ₦35,000 to The 16 Plus School (Sixth Form). 4 Obokun Street, off Coker Road, Ilupeju, Lagos. Tel: 08038210023, 08166499901, 09021620654.

First Name (s): _____

Surname of Student: _____

Address: _____

First Language (if not English): _____ Date of Birth: _____

Nationality: _____ Religion: _____

Gender: Male ☐ Female ☐

Any Special Needs? YES ☐ NO ☐ NOT SURE ☐ IF YES, SPECIFY ☐

Programme Choice: Please Tick appropriately

A'LEVEL:

Cambridge A'Level (Accelerated) ☐ Cambridge A'Level (Advanced Subsidiary) ☐

Cambridge A'Level (Advanced) ☐ 1 TERM A'LEVEL with SAT/TOEFL/IELTS/UTME ☐

Subject Combination

SENIOR SECONDARY SCHOOL PROGRAMME:

IGCSE (Year 10 & 11) ☐ WASSCE/GCE (1 YR) ☐ WASSCE/IGCSE Retakes ☐

Subjects to be taken:

FOUNDATION PROGRAMME (6-9months): Please tick appropriately

UK FOUNDATION IN PARTNERSHIP WITH CITY COLLEGE OXFORD, UK ☐

CANADIAN OSSDIPLOMA IN PARTNERSHIP WITH CONVOY ACADEMY, ONTARIO ☐

Day Student ☐

Occasional Boarding ☐

Full Boarding ☐

Last Schools Attended: _____

Address: _____

Tel No: _____ **Name of Principal** _____

University/ Higher Education Plans:

Nigeria ☐

UK ☐

USA ☐

Canada ☐

EXAMS TO BE TAKEN

UTME ☐

SAT ☐

ACT ☐

TOEFL ☐

IELTS ☐

CAREER CHOICE (give three options)

Expectations from The 16 Plus School:

FATHER, MOTHER OR THE OTHER PERSON (S) LEGALLY RESPONSIBLE FOR THE STUDENT:

SPONSOR:

Name of Sponsor: _____

Relationship: _____

Organization: _____

Address: _____

Tel/Mobile: _____ **Email:** _____

WhatsApp Contact: _____

NEXT OF KIN

First Name: _____

Surname: _____

Address (if different from above): _____

Tel/Mobile No: _____ **Email:** _____

Current Place of Work: _____ **Position:** _____

PLEASE SUBMIT THIS APPLICATION FORM WITH THE FOLLOWING:

- a) One (1) recent passport photograph
- b) Copy of Data Page of International Passport of any form of identification
- c) Copy of Birth Certificate
- d) Copy of JSS Certificate
- e) Copy of SSCE, WASCE, IGCSE (the applicable ones)
- f) Medical certificate

ATTESTATION (STUDENT)

I hereby affirm that the information contained in this application is accurate and complete to the best of my knowledge. I understand and agree that, The 16 Plus School (sixth form) has the right to communicate the details of my academic performance, attendance or behavior related incidents to my Parents/Guardians.

SIGNATURE

DATE

ATTESTATION (PARENTS)

I hereby agree to support and monitor the activities and progress of my child/ward in the school, by paying all stipulated fees as well as attending parent conferences/scheduled meetings.

SIGNATURE

DATE

