

JUANITA

Our Ref:

Your Ref:

L.U.Date: 27 NOVEMBER 2024



SCHOOL

P.O. Box 439 - 01000

THIKA, KENYA

Phone: +254 742 904340

Email: contact@juanitaschool.org

Website: juanitaschool.org

APPLICATION FOR ADMISSION (TRANSFER) – YEAR 2025

Form: _____ Date (DD/MM/YR): _____

- ❖ This Application is free and available at the Juanita School Admissions Office or on our webpage @ www.juanitaschool.org/admission.
- ❖ Ensure that all information is as accurate as possible to avoid disqualification.
- ❖ This application can be submitted by email, in person, or by mail in order to be considered for admission.

Student Name: _____

Date of Birth (DD/MM/YR): _____

Address: _____ Town: _____ County: _____

Telephone No. : _____

Previous School: _____

Previous School Address: _____ Phone: _____

Headmaster's recommendation: _____

Headmaster's Signature: _____ Date: _____

Official School Stamp:



A Center of Excellence ★ A Place to Live and Learn.

Father's Name: _____

Address: _____ Phone: _____

Occupation: _____

Mother's Name: _____

Address: _____ Phone: _____

Occupation: _____

Primary School: _____

Primary School Address: _____ Phone: _____

K.C.P.E RESULTS

SUBJECT	MARKS	GRADE	SUBJECT	MARKS	GRADE
English			Science		
Kiswahili			Social Studies/C.R.E		
Mathematics					
			TOTAL		

K.C.P.E. Year: _____

Church Recommendation

Name of Church: _____

Name of Priest / Minister / Pastor: _____

Denomination (A.C.K, P.C.E.A, Catholic, etc.): _____

Signature: _____ Date: _____

Official Church Stamp:

