



**Stafford
International
School.**

PLEASE ATTACH A
PASSPORT SIZE
RECENT
PHOTOGRAPH OF THE
STUDENT

37, GUILDFORD CRESCENT – COLOMBO 7.

TEL : 2671734/ 2694592/ 2684570/ 0703988100

Email : info@siscolumbo.lk

WEB : www.siscolumbo.lk

FAX : 2684573

Admission No:

MIDDLE SCHOOL ADMISSION FORM

YEAR 7 TO YEAR 9

1) Name of student: Master/Miss :

2) Date of birth: (DD/MM/YYYY) 3) Nationality :

6) Last School attended:

7) Last class passed:

8) Class to which admission is sought:

9) **Home contact No :**

Fixed Line Mobile:

Email: ID Number

10) Name of Parent/Guardian:

11) Occupation:.....

12) Official Address:.....

13) Home Address:.....

14) Office contact no:..... Mobile

15) **Names of sisters & brothers already in School**

Grade

.....
.....
.....

16) Extracurricular activities participated in the previous school.

.....
.....
.....
.....

Date:

Parents Signature.....