

BISHOP WILLIGERS SECONDARY SCHOOL



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ADMISSION FORM

STUDENT DETAILS	
STUDENT ID:	FIRST NAME:
MIDDLE NAME:	LAST NAME:
GENDER:	DATE OF BIRTH:
DAY/BOARDING:	SPONSORSHIP:
CLASS:	SCH.FEES:
NATIONALITY:	RELIGION:
CONTACT:	EMAIL:
LIN:	LANGUAGE:
HEALTH BRIEF:	FORMER SCHOOL:
VILLAGE:	SUB-COUNTY:
PARISH:	DISTRICT:
PRIMARY LEAVING EXAMINATION DETAILS	
INDEX NUMBER:	SCHOOL:
ENGLISH:	MATHEMATICS:
SOCIAL STUDIES:	INTEGR. SCIENCE:
AGGREGATES:	DIVISION:
PARENT DETAILS	
FIRST NAME:	LAST NAME:
NIN:	EMAIL:
GENDER:	CONTACT:
OCCUPATION:	
"Endure For Success"	