



## ST. PETER CLAVER HIGH SCHOOL

P.O Box 2175 Dodoma, Tanzania

Tel: (+255) 653 738 060, 0753444555

Email: spclavhs@gmail.com, website:www.stpeterclaver.ac.tz

Form No. 2B

Photo  
3.3 x 5

### REGISTRATION FORM

STUDENT'S PROFILE	<i>Block Letters</i>
First Name:	
Middle Name:	
Last Name:	

Tick (✓) where Appropriate

Course:	"O" Level	Class	"A" Level	Comb	Class

Date of Birth:		Age		Nationality	
----------------	--	-----	--	-------------	--

Postal Address:		Town:	
-----------------	--	-------	--

Residential Address	House/Plot No	Street
	Location	District

Telephone No.		Cell phone No.	
---------------	--	----------------	--

E-mail:	
---------	--

Gender:	Male		Female	
---------	------	--	--------	--

Religion:		Denomination	
-----------	--	--------------	--

Student Lives with:	Father	Mother	Both	Guardian

Previous School:	
Transfer Certificate No.:	

Entrance Exams:	Maths	Science	English	Kiswahili	Total
Percentage Marks					

List the grades of all subjects scored in Standard Seven

Subject									
Grades									

**For Official Use Only**

Admission No.	
---------------	--

Date of Admission:	
--------------------	--

Signature of Academic Dean

Signature of Headmaster

