



SPRINGFIELDS PRIMARY SCHOOL

67 Independence Avenue, PO BOX 33953, Lusaka, Zambia

Tel: (+260) 211 255 140 Cell: (+260) 953 442 188 & (+260) 977 404 814

E-mail: primary@springfieldszm.org

Photo

ENROLMENT FORM

PARTICULARS OF THE STUDENT

Forename _____

Surname _____

Date of birth (dd/mm/yy) _____

Sex Male ☐ Female ☐

Nationality _____

Grade Applied For: _____

PREVIOUS SCHOOL DETAILS

A. Name _____

B. Grade _____

C. Country _____

Please attach copy of latest school report of the pupil, a latest passport size photograph and school transfer certificate.

Medical conditions _____

Learning disabilities _____

PARTICULARS OF PARENTS

PARTICULARS	FATHER	MOTHER
Forename		
Surname		
Occupation / Employer		
Mobile Number		
Tell number (office)		
Tell number (Residence)		
Residential address		
E-mail address		
Parents' status:	Citizen <input type="checkbox"/> Employment permit <input type="checkbox"/>	Resident permit <input type="checkbox"/> Diplomatic <input type="checkbox"/>
Emergency contact person's details other than parent's / guardians	Name	Phone Number
	1.	
	2.	

FEE POLICY

PAYABLE *(Please Tick ✓)*

☐

TERMLY

☐

TWO INSTALLMENTS

1. School fees not paid by the due date shall attract an administration fee of K500.00 for a maximum of 10 days, or a part thereof. Thereafter the management, without prejudice, shall have the right to restrict/withhold its service including attendance, supply of educational material, reports and any other such measures.
2. Penalty of K200.00 to be charged in case of bounced cheques.
3. A cumulative administration fee of K500.00 will be charged after the 10 days of the first level penalty every fortnight from the default day.

FEES ARE PAID ON TERMLY BASIS.

Students for out-going (External Examinations) classes shall clear all payments in one installment at the start of the term.

Return of borrowed books by out-going (External Examinations) students shall be exactly two (2) days after writing the final Exam Paper. A penalty fee of K50.00 per book per day will be charged afterwards.

STAYING WITHIN THE PREMISES DURING BREAK TIME

Pupils are expected to stay within the premises during break time unless arrangements have been made with the office. Pupils shall not be allowed to go out due to reasons of their own safety (traffic, etc). I further accept that Springfields Primary School shall NOT be held liable in any way for his / her safety during his / her stay at the premises.

DECLARATION BY PARENTS / GUARDIAN

If my child is enrolled as a pupil I agree:

- A. To accept full responsibility without reservations, for the payment of the prescribed fees / dues.
- B. To ensure that shall observe and be subject to the rules, dress code and discipline of the school. I have received a copy of rules and dress code.
- C. That should any information / details be found to be false or incorrect, the pupil will immediately forfeit his / her place at the school.
- D. Pursuant of my child,, being accepted for admission for studies at Springfields Primary School, I hereby agree that the head / representative of the school will limit its attention to my child to First Aid only whilst within the school premises, in case of inherent risks or injuries arising from outdoor or indoor activities. I understand that the school will immediately endeavour to inform me or our doctor as per details below in case of emergency. In the event of my or the doctor's unavailability, I hereby give permission to the head / representative of the school for my child to be treated at the nearest clinic.
- E. Upon my child's wish to discontinue his / her studies at the school, I agree to give prior written notice to the Head of School of thirty (30) days before the end of the running term and clear all his / her dues to qualify for security deposit refund. In the absence of the said notice, security deposit shall not be refunded. 10 working days will be required to process the security refund.
- F. I understand that in an event of my child's fee being unsettled within a maximum of 15 days of the commencement of the term, the school will have the right to exclude him / her from all the classes and withhold his/her statement of Entry, Results etc. until such a time that the fee is settled.

I, thus, supply the following information for use in any emergency

Name of doctor:

Tel No:

Mobile No:

Signature of Parent / Guardian

Date: / /

Comments by Springfields Primary School

Signature:

Date:

/ /