



# Shalom Science and Technology Academy (SSTAC)

**MOTTO: The Rock that Never Fails**

**Telephone: (+234) 08037786597, 09099256745**

## **2018/2019 Registration Form.**

### **Important Information.**

**Examination Dates:** Open (Please contact SSTAC for a date).

**Time:** 9am prompt.

**Venue:** Shalom Science and Technology Academy (SSTAC),  
Opposite PRODA, PRODA junction,  
Industrial Layout, Emene. Enugu State.

**Subjects to be taken:** Mathematics, English language, Quantitative Aptitude, Verbal Reasoning and Basic Primary Science.

Please Attach  
Recent Passport  
Photograph of  
Candidate.

### **Section 1a.**

#### **Student Information**

<b>Surname:</b>	<b>Sex (M/F):</b>	<b>Date of Birth:</b>
<b>First Name:</b>	<b>Other Names:</b>	<b>Nationality:</b>
<b>Home Address:</b>	<b>Primary School Attended:</b>	<b>Religion:</b>

### **Section 1b.**

#### **Medical History (Please Tick appropriate answers)**

**Any Disability?** Yes  or No  **Please Specify:**

**Any Allergies?** Yes  or No  **Please Specify:**

**Any Medical Issue we need to know about?** Yes  No

**Please Note:** All parents/guardian must provide a full medical report of their child/ward on resumption. Medical report should contain Blood Group, Genotype, Infection test result including H.I.V and Hepatitis B and C

## Section 2a.

Parent/ Guardian Information	
<b>Title:</b>	Surname:
<b>First Name:</b>	Other Names:
<b>Home Address:</b>	Telephone Number:
<b>Father's Occupation:</b>	Mother's Occupation:

DECLARATION		
I declare that the information I have provided in this form is to the best of my knowledge complete and correct. I understand that any wilful misstatement renders me liable for disqualification. By signing this form, I agree to abide by the rules and regulations of SSTAC and I accept disciplinary actions for defaulting.		
<b>Name of Student:</b>	<b>Signature of Student:</b>	<b>Date:</b>
<b>Name of Parent/Guardian:</b>	<b>Signature of Parent/Guardian:</b>	<b>Date:</b>

**Please Tick appropriate answer.**

**How did you hear about us?**

- a. Leaflet    b. Radio    c. SSTAC marketing personnel    d. Third party    e. Social media    d. Others

**Please make payment of N5,000 for registration form to:**

**Account Name: Shalom Schools Ltd.**

**Account Number: 1011279869**

**Bank Name: Zenith Bank Plc.**

**OR**

**Account Name: Shalom Schools Ltd.**

**Account Number: 0043500021**

**Bank Name: Union Bank Plc.**