EMPOWER
INTERNATIONAL ACADEMY

Student Application – 2025

Name in Full: _____

(Block Letters – F / M / L) (Underline name used at home)

Date of Birth: _____ **Age:** _____

Month Day Year

Birth Place: _____ **Gender:** _____

Nationality: _____ **Passport Number:** _____

(copy of Passport to be provided)

Date of Entry: _____ **Year to be Entered:** _____

Local Address: _____

Identifying Landmarks: _____

Home Phone: _____ **Home E-Mail:** _____

Parent/Guardian: _____ Relationship to student: _____

Parent/Guardian: _____ Relationship to student: _____

PARENT/GUARDIAN INFORMATION

Name: _____

Occupation: _____

Nationality: _____

Volunteer Interests: _____

Postal Address: _____

Phone Numbers:

Home: _____

Work: _____

Mobile: _____

Employer: _____

E-mail: _____

PARENT/GUARDIAN INFORMATION

Name: _____

Occupation: _____

Nationality: _____

Volunteer Interests: _____

Postal Address: _____

Phone Numbers:

Home: _____

Work: _____

Mobile: _____

Employer: _____

E-mail: _____

Emergency Contact:

Name: _____ **Relationship:** _____

Home No: _____ **Work No:** _____ **Mobile No:** _____

(If applicable)
Overseas Contact:

Name: _____

Address: _____

Country: _____ **Phone:** _____

E-Mail: **Fax:**

SIBLINGS:

Name	Gender	Date of Birth	School (if applicable)

PREVIOUS SCHOOL EXPERIENCE, if applicable (three most recent):

1. Name: _____

Address: _____

Years Attended: _____ **From:** _____ **To:** _____

2. Name: _____

Address: _____

Years Attended: _____ **From:** _____ **To:** _____

3. Name: _____

Address: _____

YearsAttended: _____ **From:** _____ **To:** _____

Has this child ever been suspended or expelled from school? _____

When? _____ **Why?** _____

Error! Reference source not found.

	YES	NO
Has your child been involved in any special testing?	☐	☐
Has your child had special classes/ tutoring?	☐	☐
Has your child had academic difficulties?	☐	☐
Has your child been referred for psychological counselling or testing?	☐	☐

REFERENCES: (Within Uganda when possible)

1. **Name:** _____ **2. Name:** _____

Address: _____ **Address:** _____

How many years has the student studied English (or in English)? _____

Describe English language proficiency: Fluent: _____ Fair: _____ Poor: _____

Other languages spoken: _____ **Written:** _____

PICTURE RELEASE: Please check the ones that apply

☐ Soc media ☐ Website ☐ Display Boards ☐ No, I do not want my child's photo to be used in any venue

I declare that the above information is correct. I permit my child full participation in all the activities, including religious instruction and Christian acts of faith.

_____ _____ _____ _____

Signature of Parent Date Signature of Student Date

FOR OFFICE USE ONLY

CHECK ALL THAT APPLIES TO STUDENT

Interview ☐ Shadow day ☐ Placement Test ☐ CRF ☐ References ☐ Admission letter ☐

CHECK IF SUPPLIED BY PARENT/ GUARDIAN

Passport or Birth Certificate Copy School Records Immunization Records Student Health Form

Head of School _____ Admin/ Finance _____