



THAMES VALLEY COLLEGE

Kilometre 10, Sagamu Ikorodu Road, Sagamu Ogun State, Nigeria. Tel: 080244433311
email: contact@thamesvalleyschoolnigeria.com www.thamesvalleyschoolnigeria.com

Attach
Student Passport
Photo Here

APPLICATION FORM

PROSPECTIVE STUDENT'S DETAILS

Family name	
Child's First name	
Date of Birth	
Gender	
Nationality	
Proposed Year of Entry	
Religion	

PRESENT SCHOOL

School Name	
Address	
Current Class	
Email	

FATHER'S DETAILS

Name of Father	
Residential Address	
Occupation	
Nationality	
Country of residence	
Mobile Phone	
Email Address	

MOTHER'S DETAILS

Name of Mother	
Residential Address	
Occupation	
Nationality	
Country of residence	
Mobile Phone	
Email Address	

CONTACT INFORMATION

Indicate Contact Person.

Father ☐ Mother ☐ Guardian ☐

If contact person is the Guardian, please complete the information below

Name of Guardian	
Residential Address	
Occupation	
Nationality	
Country of residence	
Mobile Phone	
Email Address	

DECLARATION

I hereby confirm that the information provided above is correct

Signature

Signature by: Tick as applicable

Father ☐ Mother ☐ Guardian ☐

Kindly attach items listed below:

- Child Birth Certificate
- Child Latest School Report
- Passport Photograph