

Form Number

LAGOS STATE GOVERNMENT MINISTRY OF EDUCATION

Passport Size Photograph of Proprietor/ Proprietress

PRIVATE EDUCATION AND SPECIAL PROGRAMMES DEPARTMENT, ALAUSA

REGISTRATION FORM FOR PRIVATE NURSERY/ PRIMARY & SECONDARY SCHOOLS/ AND VOCATIONAL/ REMEDIAL CENTRES IN LAGOS STATE

1. NAME OF SCHOOL:						
2. TYPE OF SCHOOL: (NUR/PRY/SECONDARY/VOC/REM)						
3. LOCATION/ADDRESS:						
4. EDUCATION DISTRICT: ZONE						
5. LGA/LCDA						
6. OWNER'S PHONE NUMBER:						
7. SCHOOL e-mail ADDRESS:						
8. YEAR OF ESTABLISHMENT:						
9. YEAR OFAPPROVAL (if approved by Government):						
10. INDICATE PROPRIETORSHIP:						
(Whether Sole, Religious or Trust Council)						
11. NAME OF PROPRIETOR/PROPRIETRESS:						
12. ADDRESS OF PROPRIETOR/PROPRIETRESS:						
13. e-mail ADDRESS OF PROPRIETOR/PROPRIETRESS:						
14. PHONE NUMBER:						
15. TYPE OF SCHOOL STRUCTURE:						

(indicate whether purpose-built or converted)

16. SCHOOL POPULATION

NURSERY/ PRIMARY		SECONDARY		REMEDIA/ VOCATIONAL		
NUR I		JSS 1		YEAR 1		
NUR 2		JSS 2		YEAR 2		
PRY 1		JSS 3		YEAR 3		
PRY 2		SSS 1		TOTAL		
PRY 3		SSS 2				
PRY 4		SSS 3				
PRY 5		TOTAL				
PRY 6						
TOTAL						

18. AVERAG	E CLASS SIZE							
19. TEACHE	R/PUPILS/STUDENTS	S RATIO:						
20.NO OF TO	ILETS AVAILABLE F	OR PUPILS/ST	TUDENTS (WC TYPE)					
<u>M</u> =	F =	Т	TOTAL					
21. NO OF TO	OILETS AVAILABLE	FOR STAFF (V	VC TYPE)					
<u>M</u> =	F =	Т	TOTAL:					
22. NUMBER	OF CLASSROOMS A	AVAILABLE IN	THE SCHOOL:					
23. NUMBER	R OF SPECIAL ROOM	S AVAILABLE	e.g. LIBRARY, SCIENCE ROOM:					
24a.TYPE OF	24a.TYPE OF FURNITURE: (SINGLE/DUAL/OTHERS)							
24b.TOTAL N	UMBER OF FURNITI	JRE:						
25. SIGNATU	JRE AND DATE ON S	CHOOL STAM	IP .					
NAME & SIGNATUI	ATURE OF SCHOOL OWN	— — NER	NAME & SIGNATURE OF OFFICER					
(Ol	N SCHOOL STAMP)		AGENCY					
DATE			DATE					