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**GASHORA GIRLS ACADEMY OF SCIENCE AND TECHNOLOGY**

 **Educate, Inspire, Transform**

P.O. Box 993 Kigali

[www.ggast.org](http://www.ggast.org)

**2023/2024 ADMISSION APPLICATION**

 **SECTION 1: APPLICATION GUIDELINES**

**Instructions**

* This form contains 4 sections
	+ Section 1: Application Guidelines
	+ Section 2: Applicant’s Personal Information
	+ Section 3: Parents’/Guardians’ Information
	+ Section 4: Essay Questions
* Print and complete all required sections carefully.
* Application submission options (Use **ONLY 1** option)

1. Drop forms at the GGAST campus in Bugesera

2. Drop forms at UTC shop number 3.4 (T –KAY Investment)

* Application is open from **Aug 5- Aug 21, 2023, @4 PM**
* For any support regarding your application, contact **0788 757 447/ 0788 867 481** **(strictly SMS or WhatsApp).**

**Application Requirements:**

1. Notarized copies of your school report card for Senior 1, 2 and 3
2. 2 passport photos.
3. Birth certificate.
4. Copies of parents’/guardian’s IDs

**CAUTION:** Incomplete applications will be automatically disqualified.

**SECTION 2: APPLICANT’S PERSONAL INFORMATION**

**Student’s Names**

|  |  |  |  |
| --- | --- | --- | --- |
| Family Name: |  | Given Name: |  |
| Date of Birth: |  | Village: |  |
| Cell: |  | Sector: |  |
| District: |  | Province: |  |
| Telephone: |  | Email: |  |
| **Previous Schools Attended** |  **Name of School** | **Period** |
| Senior 1Senior 2Senior 3 |  |  |
| Student’s S3 Index Number: |  | Fees per Term 2022-2023: |  |
| S3 School Contact  | Email: | Telephone: |  |
|  Choose a combination: PCM - PCB - MCB - MPC - MPG - MCE - MEG  |

**EXTRA-CURRICULAR ENGAGEMENT**

Describe the sporting activities, clubs, and leadership roles you were involved with in your previous school(s).

|  |  |
| --- | --- |
| Sports & Games Involvement |  |
| School Clubs Membership |  |
| School/community Leadership Involvement |  |

**SECTION 3: PARENTS/GUARDIANS’ INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Mother’s Details: | Name: | Living / Deceased | Lives with student: YES/NO |
| Telephone: | Email:  |
| Employer: | Position: |
| Father’s Details: | Name: | Living / Deceased | Lives with student: YES/NO |
| Telephone: | Email:  |
| Employer: | Position: |
| Family address | District:Village: | Sector: Province:  |
| Primary Caregiver Other Than Parents (**If any**) | Name:  | Relationship with Student: | Lives with student: YES/NO |
| Telephone: | Email: |
| Guardian |  Employer: | Position:  |
| Emergency Contact  | Name: | Telephone No: |

**APPLICANT’S SIBLINGS:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Names:** | **Date of Birth** | **School and Level** | **School fees per term** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**\*Have you ever had a sibling attend Gashora Girls Academy? YES/NO**

* If yes, provide their full name and the period they attended GGAST.
* State the university/college attended and the year of completion.
* If employed, state the current employer.

**SECTION 4: ESSAY QUESTIONS**

**Answer all the following questions in English to the best of your ability. Make sure you answer the question in essay form and you are very clear in your responses. You may answer the questions on a separate piece of paper and attach it to this Form.**

1. Describe yourself, your family, and your community.

1. Why do you want to attend Gashora Girls Academy of Science and Technology?
2. Explain 3 career choices you would like to pursue after graduating from GGAST.

4. Tell us about a time when you experienced failure (outside of school). How did it affect you and what did you learn from it?

5. Tell us about a time when you were leading other people. What challenges did you face? What did you learn?

I certify that the above particulars and information given are correct.

Signature of the student: Date