



ZAM ZAM ENGLISH ACADEMY

Gobirawa Primary School – Katsina Road, Kurna Asabe, Dala, Kano

2023 ENROLLMENT FORM (BATCH C)

FULL NAME: _____
PHONE NUMBER: _____ WHATSAPP NO.: _____ GUARDIAN NO.: _____
LEVEL OF EDUCATION: PRIMARY SECONDARY COLLEGE GRADUATE EXAMS
SCHOOL ATTENDING: _____
DESIRED LEVEL OF STUDY: BEGINNER CLASS INTERMEDIATE ADVANCED CLASS
WHAT SECTOR ARE YOU IN? BUSINESS EDUCATION AGRICULTURE
SCHOOL FEES OPTION: MONTHLY TERMLY ALL AT ONCE

PREFERRED TIME OF STUDY (PLEASE SELECT ONLY ONE BOX)

SATURDAYS AND SUNDAYS: **8 – 10 a.m.**

SATURDAYS AND SUNDAYS: **11 to 01 p.m.**

WRITING (PLEASE, WRITE BY YOURSELF)

ENGLISH:

- Why do you want to join the Academy?

ENGLISH:

- Have you attended any English class before? YES NO If yes, why did you leave?

DECLARATION:

I, _____, hereby agree and accept to fully participate in all activities in order to advance my English Language proficiency to fluency level within nine (9) months, and to earn a recognized certificate of English Mastery from Zam Zam English Academy at the end of my studies.

Sign: _____ Date: _____ Director's Sign: _____