



Nile Union Academy

Head - Heart - Hand



Returning student Application 2020-2021

Complete this form only if you were an NUA student for the 2019 -2020 school year and you wish to return for the 2020-2021 school year.

Personal Information

Name _____ Mobile _____ Date _____

Home City or Village _____ Email _____

Date of Birth _____ Age _____

Gender:

Desired NUA Residence:

Nationality:

If Other Nationality, specify: _____

Religion:

Family Information

Father's Name _____ Mobile _____

Father's Occupation _____

Mother's Name _____ Mobile _____

Parent's Email Address _____

Educational Information

Previous Grade at NUA: _____

Office Use Only

Date Application Received _____ Application Complete? Yes No

- | | | |
|--|--|---|
| <input type="checkbox"/> Personal Picture | <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Previous School Transcript |
| <input type="checkbox"/> NUA Financial Agreement | <input type="checkbox"/> NUA Signature Sheet | <input type="checkbox"/> 3 NUA Recommendation Forms |

GPA— Cumulative: _____ Financial Responsibility: Good Questionable Bad

GPA— 2019-2020: _____ Citizenship: Good Questionable Bad

Classes Needing to be Retaken: _____

Nile Union Academy
An Adventist English Language Academy
PO Box 12, Heliopolis, Egypt
Website: www.nuasda.org
Mobile: 01002680409
Email: registrar@nuasda.org