ST. AGNES NURSERY & PRIMARY SCHOOL

"Hard Work Pays"

Official Admissions Application Form

01. STUDENT INFORMATION

ACADEMIC YEAR

EXPECTED ENTRY DATE

GRADE APPLYING FOR

FAMILY / LAST NAME (CAPITALS)

FIRST NAME

MIDDLE NAME(S)

DATE OF BIRTH

GENDER

☐ Male ☐ Female

PREFERRED NAME

NATIONALITY

SECOND NATIONALITY

RELIGION

RESIDENTIAL ADDRESS (STREET, HOUSE NO., PARISH/VILLAGE, DISTRICT, CITY)

02. PARENT / GUARDIAN INFORMATION

PRIMARY PARENT / GUARDIAN

TITLE

FIRST NAME

FAMILY NAME

RELATIONSHIP

EMAIL ADDRESS

MOBILE PHONE (PRIMARY)

SECONDARY PARENT / GUARDIAN (OPTIONAL)

TITLE

FIRST NAME

FAMILY NAME

RELATIONSHIP

NATIONALITY

MOBILE PHONE

03. EMERGENCY CONTACT (IF DIFFERENT FROM ABOVE)

CONTACT NAME

RELATIONSHIP

MOBILE PHONE

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04. EDUCATIONAL BACKGROUND

CURRENT SCHOOL / NURSERY NAME

TYPE (PRIVATE/GOVT/INTERNATIONAL)

LOCATION (CITY & DISTRICT)

LAST GRADE/CLASS ATTENDED

HAS THE STUDENT EVER REPEATED A CLASS?

☐ Yes (Specify: _____) ☐ No

DOES STUDENT HAVE LEARNING DIFFICULTIES?

☐ Yes (Specify: _____) ☐ No

LANGUAGES SPOKEN AT HOME

ENGLISH PROFICIENCY (FLUENT/GOOD/FAIR/BEG)

05. MEDICAL & HEALTH INFORMATION

ALLERGIES (SPECIFY OR 'NONE')

MEDICAL CONDITIONS (SPECIFY OR 'NONE')

SPECIAL SUPPORT NEEDS

CURRENT MEDICATION

06. SERVICES & LOGISTICS

TRANSPORT SERVICE REQUIRED?

☐ Yes ☐ No

LUNCH PROGRAM PARTICIPATION?

☐ Yes ☐ No

07. REQUIRED DOCUMENTS CHECKLIST

Please attach the following documents to this application form:

- ☐ Student's Birth Certificate or Passport Copy
- ☐ One recent passport-sized photograph of the student
- ☐ Most recent school report card or transcript
- ☐ Full health / original immunization records
- ☐ Copy of parent/guardian National ID or Passport

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08. DECLARATION & CONSENT

I/We hereby declare that the information provided in this application is accurate and truthful. I/We understand that any false information may lead to the disqualification of the application or withdrawal of admission. I/We agree to abide by the rules and regulations of St. Agnes Nursery & Primary School.

Parent / Guardian Signature

Full Name: _____

Date signed

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