



# GIRLS' COLLEGE APPLICATION FORM

PLEASE COMPLETE ALL SECTIONS (PLEASE PRINT)

PARTICULARS OF APPLICANT		DATE OF APPLICATION:	
FIRST NAMES:		SURNAME:	
DATE OF BIRTH:		PLACE OF BIRTH:	
NATIONALITY:		BIRTH CERTIFICATE / ID NUMBER:	
RELIGIOUS DENOMINATION:		PROPOSED DATE OF ENTRY:	
DAY SCHOLAR OR BOARDER:		FORM PLACE REQUIRED:	1 2 3 4 L6 U6
NON-RESIDENTS: IS A STUDY PERMIT REQUIRED?			Yes No
<b>DETAILS OF PARENTS OR GUARDIANS</b>			
STATUS OF PARENTS (PLEASE TICK):		Married:	Divorced: Single: Widowed: Deceased:
NAME OF PERSON / COMPANY RESPONSIBLE FOR PAYING SCHOOL FEES:		WITH WHOM DOES THE APPLICANT RESIDE:	
<b>FATHER'S DETAILS</b>			
FATHER'S NAME:		FATHER'S SURNAME:	
FATHER'S I.D. NUMBER:		FATHER'S CELL NUMBER:	
RESIDENTIAL ADDRESS OF FATHER:			
FATHER'S OCCUPATION		FATHER'S EMAIL:	
NAME OF FATHER'S EMPLOYER:			
BUSINESS ADDRESS OF FATHER:			
<b>MOTHER'S DETAILS</b>			
MOTHER'S NAME:		MOTHER'S SURNAME:	
MOTHER'S I.D. NUMBER:		MOTHER'S CELL NUMBER:	
RESIDENTIAL ADDRESS OF MOTHER			
MOTHER'S OCCUPATION		MOTHER'S EMAIL:	
NAME OF MOTHER'S EMPLOYER:			
BUSINESS ADDRESS OF MOTHER:			
<b>GUARDIAN'S DETAILS</b>			
GUARDIAN'S NAME:		GUARDIAN'S SURNAME:	
GUARDIAN'S I.D. NUMBER:		GUARDIAN'S CELL NUMBER:	
RESIDENTIAL ADDRESS OF GUARDIAN:			
GUARDIAN'S OCCUPATION		GUARDIAN'S EMAIL:	
RELATIONSHIP OF GUARDIAN TO APPLICANT:			
NAME OF GUARDIAN'S EMPLOYER:			
BUSINESS ADDRESS OF GUARDIAN:			



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INFORMATION ON PREVIOUS SCHOOLS			
PRIMARY SCHOOL/S ATTENDED			
GRADES ATTENDED:		DATES FROM AND TO:	
PRIMARY SCHOOL/S ATTENDED			
GRADES ATTENDED:		DATES FROM AND TO:	
SECONDARY SCHOOL/S ATTENDED			
FORMS ATTENDED:		DATES FROM AND TO:	
SECONDARY SCHOOL/S ATTENDED			
FORMS ATTENDED:		DATES FROM AND TO:	
THIS SECTION IS TO BE FILLED IN ONLY IF THE APPLICANT IS ALREADY ATTENDING A <b>SECONDARY</b> SCHOOL			
PRESENT FORM:			
SUBJECTS TAKEN IN PRECEDING YEARS:	FORM 1 & 2 YEARS	FORM 3 & 4 YEARS	FORM L6 YEAR
		(INCLUDE EXTERNAL EXAM GRADES)	(INCLUDE EXTERNAL EXAM GRADES)
EXTRA-MURAL INTERESTS AND ACTIVITIES (E.G. SPORTS TEAMS, CULTURAL ACTIVITIES, HOBBIES, CHARITY WORK, ETC.)			
<b>GIRLS' COLLEGE WILL CONTACT YOUR PREVIOUS SCHOOL TO OBTAIN A CLEARANCE CERTIFICATE</b>			
PLEASE PROVIDE THE FOLLOWING:			
PRESENT SCHOOL:		CURRENT GRADE AND CLASS:	
ADDRESS:			
PRESENT SCHOOL'S EMAIL ADDRESS:			
NAME OF HEADMASTER:			
ANY SPECIAL TALENTS (E.G. SPORTS AND CULTURAL):			
ANY OUTSTANDING SCHOOL FEES:			
ANY OUTSTANDING DEBTS (E.G. TEXT BOOKS, LIBRARY BOOKS, COMPUTER EQUIPMENT):			
<b>PLEASE CONFIRM HOW YOU CAME TO HEAR ABOUT GIRLS COLLEGE</b>		OPEN DAY	GIRLS COLLEGE WEBSITE
RECOMMENDATION FROM FAMILY OR FRIEND	OLD GIRL OR OLDER SIBLING	GIRLS COLLEGE FACEBOOK PAGE	OTHER
<b>DETAILS OF SISTERS / RELATIVES WHO HAVE PREVIOUSLY ATTENDED OR ARE ATTENDING GIRLS' COLLEGE:    SISTER / RELATIVE (delete as applicable)</b>			
FIRST NAME	SURNAME		
YEARS ATTENDED	GAMES HOUSE		