



David Horan, B.Soc.Sci., HDE., MA.
Principal

APPLICATION FOR ADMISSION

Please complete the entire form and include a copy of your child's BIRTH CERTIFICATE or PASSPORT and return it with the non-refundable \$100.00 application fee and the latest school report card (if applicable).

Student's Name: _____
Surname First Name Middle Name

Please check the appropriate box:

Date of Birth (dd/mm/yy) _____ Sex: Male Female

Bermudian Non-Bermudian Religion _____

Year of Entry: 20 ____

RECEPTION

PRIMARY Year 1 Year 2 Year 3 Year 4 Year 5 Year 6

SECONDARY Year 7 Year 8 Year 9 Year 10 Year 11 Year 12

Applicant's Present School _____ Current Year Group _____

Father/Guardian

Name: _____

Address: _____

Place of Employment: _____

Email: _____

Phone (hm): _____

Phone (wk): _____

Phone (cell): _____

Mother/Guardian

Name: _____

Address: _____

Place of Employment: _____

Email: _____

Phone (hm): _____

Phone (wk): _____

Phone (cell): _____

Parents: Married Divorced Separated Together

Applicant lives with: Both Parents Mother Father Guardian

Agreement

I understand that all admissions decisions are made based on the school's Admissions Policy, including interviews and screening that may be deemed necessary by the Board of Governors and the Principal.

I understand that students are expected to conform to the school rules and regulations, particularly those regarding conduct, dress, attendance, and participation in school activities.

I give permission to Warwick Academy to contact the school that my child is presently enrolled at and for that school to release information that may be required to support this application. This will include information relating to academic performance, tuition status, learning support needs/psycho-educational assessments, attendance, safeguarding, conduct, and to verify good standing.

FOR OFFICE USE ONLY

Application Received: _____

Application Fee Paid: _____

Copy of Birth Certificate/Passport: _____

Report Card Received: _____

Tour Date: _____

School Reference: _____

Reports Received: _____

Screening Date: _____

Offer/Contract Signed: _____

Enrolment Fee Received: _____

Signed _____

Date _____

Please charge the application fee to my credit card:

Name on Card: _____
Card number: _____ Expiry Date: _____
CVC _____

OR

For online banking transfer our account details are as follows:

HSBC

Warwick Academy

A/C # 010-260628-004

Please enter the applicant's name in the description field. Bank confirmation number _____

Additional Information:

How did you hear about Warwick Academy?

- Family member Friend Website Newspaper
 Alumni Social media Radio
 Other _____

What aspects of the school led you to consider Warwick Academy? Tick as many as apply

- Academic Excellence Drama Music Sports
 Co-Ed Diversity Tuition
 Other _____