APPLICATION CHECKLIST			
Application Form			
Copy of Birth Certificate			
Registration Fee	_		



	OFFICE USE ONLY
Re	eceipt No
Ar	nount
Da	ıte
B/	C No

WHITESTONE SCHOOL | ENTRANCE APPLICATION

PARTICULARS OF CHILD

Surname Date of Birth					
First Names Boy Girl					
Nationality Religious Denomination					
Proposed Date of Entry Proposed Grade of Entry Day Scholar Boarding					
Present School Present Grade					
Local Application Foreign Application Please Note: Foreign entrance applications require a study permit					
Is he/she proficient in the English Language? Yes No Home Language					
Nature of any Mental or Physical Handicap or	r Learning Difficulties				
Schools previously attended					
School	Grade/Form	Dates			
Details of brothers or sisters for whom you ar	e also making (or have also made) application for enr	olment*			
Name	Present Grade	Proposed Entry Dates			
Details of brothers and sisters already attendi	ing Whitestone School				
First Names	Surname	Current Grade at Application			
I/We,(full names of both Parents or Guardian) _					
in the capacity of Father / Mother / V	Vidowed Mother / Mother with Sole Guardianship / Le	gal Guardian (delete not applicable)			
of (Address)					
	(Business)	(Cell)			
Email Address					
admission to the School at the date requested	of \$ for one child and apply for my above- l. I/We acknowledge that his/her admission is subject force, and subject to my formal acceptance of an offe	t to his/her passing the school examination or			
Oate Signature					