

**For Official Use Only**

APPLICATION FEE	
BIRTH CERTIFICATE	
BAPTISM CERTIFICATE	
NATIONAL REG. CARD	
TEACHER RECOMM. FORM	
IMMUNIZATIONS	
ACCEPTANCE LETTER	
DEPOSIT	
BILL	
CLASS REQ. LIST	



**URSULINE CONVENT SCHOOL  
ST. ANGELA'S**

Collymore Rock, St. Michael, Barbados

**APPLICATION FORM  
FEE OF \$25.00 PAYABLE ON APPLICATION  
PLEASE PRINT ALL INFORMATION**

**CHILD'S** SURNAME..... **OTHER NAMES**.....  
(Underline name child is called by)

SEX..... DATE OF BIRTH: MO.....DATE.....YR..... NAT. REG. # .....

COUNTRY OF BIRTH..... ADDRESS.....

\* NON-NATIONAL students **MUST** have a current **Student's Visa** from Immigration Dept. to be in school.

RELIGIOUS DENOMINATION..... DATE OF BAPTISM: MO.....DATE.....YR.....

CURRENT SCHOOL..... REFERRED BY.....

**SIBLINGS** PRESENTLY IN ENROLLED AT UCS.....

Is mother a past pupil of St. Ursula's?..... If 'YES', Give details and house colour.....  
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**FATHER'S** SURNAME..... OTHER NAME ..... HOME TEL#.....

HOME ADDRESS..... COMPANY NAME.....

WORK TEL #..... CELL#..... OCCUPATION.....

NATIONALITY..... RELIGIOUS DENOMINATION..... **E Mail**.....  
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**MOTHER'S** SURNAME..... OTHER NAME ..... MAIDEN NAME.....

HOME ADDRESS..... HOME TEL#..... CELL #.....

COMPANY NAME..... OCCUPATION..... WORK TEL#.....

NATIONALITY..... RELIGIOUS DENOMINATION..... **E Mail**.....  
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(If applicable) **GUARDIAN'S** NAME.....

ADDRESS..... HOME #.....

COMPANY NAME..... WORK TEL#..... CELL#.....

OCCUPATION..... NATIONALITY..... RELIGIOUS DENOMINATION.....

RELATIONSHIP TO CHILD..... **E Mail**.....  
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**IF NEITHER PARENT/GUARDIAN CAN BE REACHED, EMERGENCY CONTACT IS:**

NAME.....

HOME TEL #..... WORK #..... CELL #.....

DOES YOUR CHILD SUFFER FROM **ALLERGIES?** (Specify).....

**CHRONIC ILLNESSES?**..... **PHYSICAL DISABILITIES?**.....

**EDUCATIONAL DELAYS OR CONCERNS**.....

**OTHER INFORMATION SCHOOL SHOULD HAVE**.....

I agree to abide by all the regulations of the School. I also agree to pay the School fees **promptly** by the **first week of each term**, and I understand that a term's notice (or a term's fee in lieu of notice) is required before I withdraw the child from the school.

**Date of Application:** MO.....DATE.....YR..... SIGNATURE OF PARENT/GUARDIAN.....

[ ] Interviewed \_\_\_\_\_ [ ] Place offered \_\_\_\_\_ NB: \_\_\_\_\_