

Please ensure you read the Island Education Policy (available on our website or from the school) before completing this form as it outlines our admission policy.

CHILD'S FIRST NAMES:

CHILD'S SURNAME

DATE OF BIRTH:

PREVIOUS SCHOOL:

HEALTH e.g Special Medication or other medical conditions.

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PARENT(S)/GUARDIAN(S).....

CONTACT NUMBERS: HOME......WORK......

HOME ADDRESS (on Ascension).....

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START DATE :

END DATE IF TEMPORARY STUDENT:

PARENT/GUARDIAN'S SIGNATURE:

DATE.....

Please enclose the most recent school report (except Foundation Stage 1 applications) including any Individual Education Plans and/or information about additional support your child has received in previous schools.

Please return this form to: Secretary Two Boats School Ascension Island

Learning together, Success forever

