



ENROLMENT REGISTRATION FORM

STUDENT

Student's Family name

Student's First Names

Student's Preferred Name

Male or Female: Date of Birth: [day / month / year]

Town of Birth Country of Birth

Nationality: Religion:

First Language: Passport Number:

Other Languages Spoken

Present School of Student:

Address of Present School:

(Please send a copy of the applicant's latest school report/certificate)

Level of English:
e.g. none / beginner / elementary / intermediate / advanced

Level of English:
e.g. IELTS level (certificate)

Preferred date of entry: Preferred length of stay:

Office Use Only

1 2 3 4 5 6



PARENTS

Name of Father:

Name of Mother:

Home Address (for mail):

City:

Code:

Country:

Profession of Parent(s):

Email Address:

Tel (home):

Fax (home):

Mobile (Father):

Mobile (Mother):

GUARDIAN (if applicable)

Guardian's Name:

(details may be supplied later if necessary)

Guardian's Address:

Guardian's Email:

Tel (home):

Fax (home) :

Guardian's Tel (Professional):

Guardian's Fax (Professional):

Guardian's Mobile Tel:



FUTURE EDUCATION:

Please give destination after leaving Bishopstrow College (if known): e.g. *UK School or University / Returning to School in home country / Undecided*

MEDICAL HISTORY

Are there any health or special circumstances which the College should be aware of? Are any treatments required? e.g. *general health, allergies, special medication*

DECLARATION

We request that the above named child be registered as a prospective student. We understand that the standard terms and conditions of the College may change from time to time as circumstances require, and will apply in all our dealing with the College. We understand that the College (through the responsible official) may obtain, process and hold personal information about our child and we consent to this for the purposes of assessment, and, if a place is later offered, in order to promote and protect the welfare of the child.

All applications must include the non-refundable registration fee of £100 (payable to Bishopstrow College).

It is important that both parents sign unless only one parent is living. If this is difficult, please contact your agent or the College.

Signature of father:

Date:

Signature of mother:

Date:

Please attach a recent passport size photograph here

**The Principal
Bishopstrow College
Bishopstrow, Nr Warminster
Wiltshire, BA12 9HU, England
Tel: +44 (0) 1985 219210
Fax: +44 (0) 1985 212561
mail: info@bishopstrow.com
Website: www.bishopstrow.com**