



ST. CATHERINE'S SCHOOL

TWICKENHAM

Application Form

St Catherine's School Application for Admission

(Interviews cannot be arranged until this form has been completed and returned to the school)

PLEASE WRITE CLEARLY IN CAPITAL LETTERS

PART ONE

PARTICULARS OF CANDIDATE

1. Name in full _____
2. Date of Birth _____
3. Present School with address in full and date of entry. Please attach copy of last School Report

4. Proposed year of entry _____ Term Autumn Spring Summer (please tick)
5. Nationality _____
6. Whether physically fit and able to take part in school games Yes No (please tick)
NB If "NO" a Medical Certificate should accompany this form
7. Full name of Father _____
8. Father's Occupation _____
9. Daytime Tel No _____ Evening _____
10. Email Address _____
11. Full name of Mother _____
12. Mother's Occupation _____
13. Daytime Tel No _____ Evening _____
14. Email Address _____
15. Siblings/Schools _____

16. Have you attended a Visitors' Afternoon/Open Evening Yes No (please tick)

PART TWO

(required for census)

ETHNIC BACKGROUND

PLEASE INDICATE ETHNIC BACKGROUND OF CANDIDATE BELOW: (please tick)

WHITE

- British
- Irish
- American
- European
- Any other white background

MIXED

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed background

ASIAN OR ASIAN BRITISH

- Chinese
- Japanese
- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

BLACK OR BLACK BRITISH

- Caribbean
- African
- Any other black background
- Any other ethnic background

PART THREE

(required for census)

RELIGION

PLEASE INDICATE RELIGION OF CANDIDATE BELOW: (please tick)

- Roman Catholic
- Church of England
- Christian Orthodox
- Other Christian (please state) _____
- Jewish
- Buddhist
- Hindu
- Sikh
- Muslim

PART FOUR

TO BE COMPLETED AND SIGNED BY PARENT OR GUARDIAN

If my daughter/son is offered a place at St Catherine's School and I decide to accept it, it is my intention that s/he shall remain a pupil at St Catherine's School until she is 16/he is 17, subject only to circumstances unforeseen and unavoidable.

I enclose a non-refundable registration fee of £100. Registration does not constitute an offer of a place.

Signature of Parent or Guardian _____

Please state relationship _____

Full Address _____

Date _____ Telephone Number _____

Please write covering letter if there are any circumstances that the school needs to be aware of.

Please return this form and registration to:

Mrs Angelita Jones - St Catherine's School,
Cross Deep, Twickenham TW1 4QJ
Telephone: 020 8891 2898 ext 250
Facsimile: 020 87449629

