

Secondary School Entry Form



PLEASE FILL IN ALL FIELDS. DEADLINE FOR SUBMISSION: THURSDAY, OCTOBER 2, 2014

STUDENT INFORMATION

STUDENT NAME: _____

ADDRESS: _____

CLASS: _____ QUESTION SELECTED: # _____

TELEPHONE (H): _____ (M): _____

E-MAIL: _____ SIGNATURE: _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN CONTACT: _____ SIGNATURE: _____

SCHOOL INFORMATION

NAME: _____

EDUCATION DISTRICT: _____ TELEPHONE: _____

ADDRESS: _____

E-MAIL: _____ FAX: _____

PRINCIPAL'S NAME: _____

E-MAIL: _____ SIGNATURE: _____

SCHOOL'S STAMP: _____

FOR OFFICIAL USE ONLY

ENTRY CODE: _____

QUESTION SELECTED: # _____

NAME: _____

SIGNATURE: _____

*** No form shall be accepted without the Principal's signature and school stamp.**