

Regent Hill International Pre-School P.O. Box 80408 Gaborone | Plot 4618, Metsimotlhabe Tel: 310 5187 | Fax: 391 9717 | Cell: 76 353 385/71 441 898 email: inquiry.metsi@regenthillschool.com web: www.rhis.ac.bw

## **Application for Admission (Pre-School)**

Child					
Surname:				G	ender:
First Names:					
Date of Birth: dd	mm	уу	Town/Village	e: Co	ountry:
Citizenship:					
Number of children in	family:		Posi	tion in family:	
Any siblings attending	Regent l	Hill? (give	names)		
Language spoken at ho	ome:				
Desired date of Entry	· To Rege	nt Hill:	Cla	ss: Reception	
				Kindergarten 1 & 2	
Previous School:					
Father					
Full Name of Father:					
Postal Address:					
Physical Address:					
Citizenship:					
Occupation & Place of	Work:				
Cell:	Landlin	e:		E-mail:	
Mother					
Full Name of Mother:					
Postal Address:					
Physical Address:					
Citizenship:					
Occupation & Place of	Work:				
Cell:	Landlin	e:		E-mail:	

Next of kin N	Name:	Number:
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**Kindergarten**: 2 TO 4 YRS **Reception**:  $4^{1}/_{2}$  TO 6 YRS

Has your child ever been identified as having any specific learning needs (is gifted or has a specific learning difficulty)? If yes, please give details below:

Has your child received any specialized support for a learning need in the past? If yes, please give details below:

## PLEASE NOTE:

- 1. It is important to disclose your child's history.
- 2. Completion of this form does not guarantee that a place will be offered.
- 3. To qualify for entry into any level, a child should have attained the official entry age.
- 4. In addition, a **passport size photograph** and a photocopy of the **child's birth certificate**, **and parents ID**,**s** must accompany the completed form.

Child's Allergies, if any:		

Family Doctor: Name: \_\_\_\_\_ Landline: \_\_\_\_\_ Cell: \_\_\_\_\_

## DECLARATION BY PARENT/LEGAL GUARDIAN:

- 1. I declare that the information furnished on this form is correct to the best of my Knowledge.
- 2. I understand that fees must be paid in advance or in 2 installments only, and that it is my contractual responsibility to pay fee on time to ensure that my child is not sent out of class for nonpayment of fees
- 3. That I have read and fully understood all the terms and conditions elaborated in the school prospectus

SIGNED:\_\_\_\_\_

DATE: \_\_\_\_\_

rather MOTHER LEGAL GUARDIAN	FATHER	MOTHER	LEGAL GUARDIAN
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