

Regent Hill International Pre-School P.O. Box 80513 Gaborone | Plot 2706, Tlokweng Tel: 395 9445 | Fax: 391 9729 | Cell: 72 899 921 email: inquiry.pretlokweng@regenthillschool.com web: www.rhis.ac.bw

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

Child						
Surname:				Gender:		
First Names:						
Date of Birth: dd	mm	уу	Town/Village:	Country:		
Citizenship:						
Number of children in family:			Position in	Position in family:		
Any siblings attendi	ng Regent	Hill? (g	ive names)			
Language spoken at	home:					
Desired date of Entry To Regent Hill: Class: Reception				eption		
			Kind	lergarten 1 & 2		
Father						
Full Name of Father	:					
Postal Address:						
Physical Address:						
Citizenship:						
Occupation & Place of	of Work:					
Cell:	Landl	ine:	E-mai	il:		
Mother						
Full Name of Mother	r:					
Postal Address:						
Physical Address:						
Citizenship:						
Occupation & Place of	of Work:					
Cell:	Landl	ine:	E-mai	il:		

Next of kin	Name:	Number:

**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 the non-refundable Development Levy serves to confirm my acceptance of a school place. I further acknowledge that the Development Levy is distinct from the Term Fees and that it is **Non-Refundable**.
- 3. That I have read and fully understood all the terms and conditions elaborated in the school prospectus
- 4. 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

SIGNED:	DATE:
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FATHER	Mother	LEGAL GUARDIAN	