



St Heliers School

Application to attend St Heliers School as an International Fee Paying Student

STUDENT'S FIRST NAME: _____ SURNAME: _____
COUNTRY OF BIRTH: _____ DATE OF BIRTH: _____ MALE/FEMALE
FIRST LANGUAGE: _____ ETHNICITY: _____
INTENDED PERIOD OF STUDY: _____ TO: _____
ADDRESS OF STUDENT WHILE STUDYING AT ST HELIERS SCHOOL: _____

PHONE: _____ EMAIL: _____

DOES YOUR CHILD HAVE ANY SPECIAL LEARNING, MEDICAL, PSYCHOLOGICAL, OR BEHAVIOURAL NEEDS?* YES / NO

IF YES, PLEASE EXPLAIN _____

** Failure to disclose relevant information in the above section, or the provision of false information may result in termination of enrolment.*

Parent's Names	Home Address	Phone Numbers	Email address
		Home: Work Mobile	
		Home: Work: Mobile	

IF STUDENT IS NOT LIVING WITH PARENTS, PLEASE FILL IN THE NAME OF DESIGNATED CAREGIVER OR HOME STAY CARER:

Caregivers' Names	Home address	Phone Numbers	Email address
		Home: Work: Mobile:	
		Home: Work: Mobile:	

Emergency Contact Person _____ Phone _____

I request that _____ be admitted to St Heliers School as an International Fee Paying Student. I acknowledge that if he/she is admitted as a student, he/she is bound by the rules and uniform requirements of the school. I acknowledge that as a parent I am bound by contractual agreements signed as part of the enrolment procedure.

I understand that all young international students (Years 1 to 6) enrolled at St Heliers School, must live with and continue to live with a parent.

(PARENT'S SIGNATURE)