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KINGSWAY KINDERGARTEN AND PREPARATORY SCHOOL

10-12 Osbourne Road, Kingston 10

Telephone: (876)926-2379, (876) 968-9179, Fax: (876)908-2050

Email: [kingswayhigh@cwjamaica.com](mailto:kingswayhigh@cwjamaica.com) [kingswayhighandprep@gmail.com](mailto:kingswayhighandprep@gmail.com)

**APPLICATION FOR ADMISSION FOR ACADEMIC YEAR 2024/2025**

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First Name:

Last Name:

Middle Name:

Date of Birth:

Last Grade Completed:

Last School Attended:

Address:

Name(s) of Sibling(s) Attending Kingsway:

Work #:

Mobile #:

Mother’s Name:

Occupation:

Phone Contact: Home #:

Email address:

Father’s Name:

Occupation:

Phone Contact: Home #:

Email address:

Work #:

Mobile#:

Guardian’s Name: Address:

Occupation: Email: Contact:

Church Affiliation:

Means by which you learnt of Kingsway Kindergarten and Preparatory School:

Reason for choosing Kingsway Kindergarten and Preparatory School?

**FINANCE/TUITION INFORMATION**

*All fees are to be paid prior to the beginning of each school term. Due to the rising cost of education, fees will be unavoidably increased at intervals to ensure the continued functioning of the school.*

**PAYMENT PLAN**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **Term 1**  **September** | **Term 2**  **January** | **Term 3**  **April** | **Annually** |
| Tuition | 56,000.00 | 56,000.00 | 56,000.00 | 168,000.00 |
| Miscellaneous Fee | 4,000.00 | 4,000.00 | 4,000.00 | 12,000.00 |
| **Total** | **$60,000.00** | **$60,000.00** | **$60,000.00** | **$180,000.00** |

**DOCUMENTS TO BE SUBMITTED WITH APPLICATION**

2 PASSPORT SIZE PHOTOGRAPHS

REFERENCE FORM FOR PROSPECTIVE STUDENTS - GRADES 1 - 6 (Enclosed)

LAST SCHOOL REPORT (original & one copy)

IMMUNIZATION CARD (original & one copy)

BIRTH CERTIFICATE (original & one copy)

MEDICAL REPORT (Form enclosed)

***Application Form should be returned with a Registration Fee of $3,000.00. This is mandatory and is non-refundable.***

**(Please continue overleaf)**

*I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ agree to observe:*

*(Name of student)*

1. *Propriety in speech, on and off the school campus.*
2. *Christian courtesy and mannerly conduct on all occasions.*
3. *Healthful habits which include:*
   * *Personal cleanliness*
   * *Hair neatly cut and well-groomed at all times.*
   * *Neatness in dress and personal appearance.*
   * *Observance of the rules concerning the wearing and proper care of the uniform during all school sessions.*

**OFFICIAL USE ONLY. PLEASE DO NOT WRITE BELOW**

*Name of person, if different from parent/guardian, responsible for student’s school fee and to whom financial statements should be sent (State relationship after name)*

*Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relation to child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*I/We the undersigned, agree to:*

1. *Ensure that my child/ward communicates honestly, especially during the interview*
2. *Plan how I will fund my child’s/ward’s education before enrolment.*
3. *See to prompt payment of school fees.*
4. *Avoid having my child/ward to be withdrawn from classes because of fees.*
5. *Become an active member of the Home and School Association.*
6. *Ensure that my child/ward maintains all the standards and principles of the school.*
7. *Respond to correspondence sent from school.*
8. *Disclose all pertinent information that will heighten my child’s/ward’s learning.*
9. *Support the measures used by the school to correct undesirable behaviour displayed by my child/ward*
10. *Withdraw my child/ward if he/she violates the school rules.*

***Signature of Parent/Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***ACCEPTED: YES NO***

***PROBATION: YES NO***

***SPECIAL READING SESSIONS: YES NO***

***REMARKS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***DATE OF ACCEPTANCE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLACEMENT \_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**“THE KING’S WAY IS BEST”**

***PLEDGE***

***Voluntary Declaration***

*I hereby declare that I understand that an application for my child/ward to* ***Kingsway Kindergarten and Preparatory School*** *does* ***NOT*** *mean acceptance of my child/ward for admission to the school. I further declare that I understand that the application fee of three thousand dollars* ***($3,000.00),*** *to be submitted with this Application Form****,*** *is* ***NON-REFUNDABLE****. Therefore, even if my child/ward is not accepted by the school for admission, the sum will* ***NOT*** *be refunded to me.*

*I further declare that I understand that all documents submitted with this form become the property of* ***Kingsway Kindergarten and Preparatory School*** *and will not be returned to me. Additionally, I also declare that to the best of my knowledge, all the information provided by me, on this form, is correct and that any false or misleading information given by me will result in an automatic cancellation of this application.*

*I understand that any document required by the school to process this application, which is not submitted by the prescribed deadline, renders my application invalid. Therefore, my child/ward will not be considered for admission to* ***Kingsway Kindergarten and Preparatory School****.*

*Signature of Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*