

The ENGLISH Academy
New Pupil Registration Enquiry

REF		Date Enquired (DD/MM/YY)	/	/	Siblings Applying
Student's First Name				Parent's Name	
Student's Family Name				Nationality	
Date of Birth (DD/MM/YY)				Gender (circle 1)	Male / Female
Current Year				Parent's Mobile	
Year Going to		Key Stage Going to		Parent's Email	
Current School				Parent's Signature	
Is there any medical information we should be aware of?					
Siblings at TEA (circle 1)	YES	NO			Sibling Ref
If yes, provide details:					
Name			Current Year		
Other Siblings Applying (circle 1)	YES	NO			
If yes, provide details:					
Name			Year (Going to)		

Report Received		Test Interview Fee Paid	
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Enquired By (Circle 1)	Tel	Visit	Email	Other _____ (specify)
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How did they hear about TEA?	Friend	Family	Website	Directory	Other _____ (Specify)
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Recommended to be Accepted by	Circle 1		Set	Staff Code	Signature
English Department	Yes	No			
Maths Department	Yes	No			

Please leave comments on reverse

<input type="checkbox"/>	RECOMMENDED to be accepted for admittance to Year: _____	Staff Code
<input type="checkbox"/>	NOT Recommended for admittance.	

Principal's Signature		<input type="checkbox"/> ACCEPTED for admittance to year: _____
Date (<i>DD/MM/YY</i>)		<input type="checkbox"/> NOT accepted
Comments		

Please enclose:

- Copy of student's birth certificate.
- Copy of student's Civil I.D.
- Copy of last two reports of school previously attended.

Comments:

Staff: _____