



THE
KINGSLEY
SCHOOL

REGISTRATION FORM

To be completed and returned in BLOCK CAPITALS to the Registrar
when applying for consideration for entry.

CHILD'S SURNAME _____

CHILD'S FORENAME(S) _____

Child's Preferred Name _____

Child's Date of Birth _____

Child's Nationality _____

Child's Religion _____

Child's Address _____

Please affix
passport size
photograph.

Proposed Term and Year of Entry _____

Have you registered your child's name at any other school/s and if so, which?

PARENT/GUARDIAN 1

Title _____ Forename _____

Surname _____

Relationship to Child _____

Occupation _____

Address (if different to child) _____

PARENT/GUARDIAN 2

Title _____ Forename _____

Surname _____

Relationship to Child _____

Occupation _____

Address (if different to child) _____

Home Telephone No _____

Mobile Telephone No _____

Email Address _____

Home Telephone No _____

Mobile Telephone No _____

Email Address _____

Please mention the names of any other members of the family attending the School or registered for entry; or any other connection with the School.

Please say how you first heard of the School:

- | | | |
|--|---|---|
| <input type="checkbox"/> Local reputation | <input type="checkbox"/> School website | <input type="checkbox"/> Advertisement (please specify i.e. billboard/newspaper/magazine/flyer) |
| <input type="checkbox"/> Present school | <input type="checkbox"/> Other website or social media (please specify) | |
| <input type="checkbox"/> Recommended by a friend | <input type="checkbox"/> Other (please specify) | |

Please number 5 choices in order of preference. Please note that we cannot guarantee that we will be able to offer all courses on this list and that some are subject to demand.

APPLIED SCIENCE LEVEL 3 DIPLOMA	
ART & DESIGN: FINE ART A-LEVEL	
BIOLOGY A-LEVEL	
BUSINESS A-LEVEL	
CHEMISTRY A-LEVEL	
CLASSICAL CIVILISATION A-LEVEL	
DIGITAL MEDIA LEVEL 3 EXTENDED CERTIFICATE	
DRAMA & THEATRE STUDIES A-LEVEL	
ECONOMICS A-LEVEL	
ENGLISH LANGUAGE A-LEVEL	
ENGLISH LITERATURE A-LEVEL	
FASHION & TEXTILES A-LEVEL	
FOOD SCIENCE & NUTRITION LEVEL 3 DIPLOMA (50% COURSEWORK, 50% EXAM)	
FRENCH A-LEVEL	
FURTHER MATHEMATICS A-LEVEL	
GEOGRAPHY A-LEVEL	
HEALTH & SOCIAL CARE CAMBRIDGE TECHNICAL	
HISTORY A-LEVEL	
LATIN A-LEVEL	
MATHEMATICS A-LEVEL	
MUSIC A-LEVEL	
PHILOSOPHY, ETHICS & RELIGION A-LEVEL	
PHYSICAL EDUCATION A-LEVEL	
PHOTOGRAPHY A-LEVEL	
PHYSICS A-LEVEL	
POLITICS A-LEVEL	
PSYCHOLOGY A-LEVEL	
SOCIOLOGY A-LEVEL	
SPANISH A-LEVEL	
SPORT CAMBRIDGE TECHNICAL	

PERSONAL STATEMENT

Please give your reasons for making this application.

You should describe in approximately 1000 but no more than 1500 words: your attitude to learning; your suitability for the Sixth Form courses that you hope to study; how you will be able to contribute to the life of the School in the Sixth Form; your interests and hobbies.

You may write in the box below and / or attach a separate sheet.

Child’s Current School _____

Address _____

Name of Headteacher _____ Current School Telephone No _____

Date of Entry _____ Current Year Group _____

Please give details of any medical condition (including allergies/disability):

Does your child receive any Learning Support at her current school? ☐ Yes ☐ No

Please provide copies of any Educational Psychologist or Specialist Teacher Reports

Early registration is recommended. Offers of places are subject to availability and the admission requirements of the School at the time offers are made.
A copy of the current edition of the Standard Terms and Conditions will be supplied on request.

DECLARATION

We request that the above-named child is registered as a prospective pupil.

We confirm that we have made a BACS payment of £75 (details below). We understand that the standard terms and conditions of the School will undergo reasonable changes from time to time as circumstances require and will apply in all our dealings with the School. We understand also that the School (through the Headteacher, as the person responsible) may obtain, process and hold personal information about our child, including sensitive information such as medical details and we consent to this for the purpose of assessment and, if a place is later offered, in order to safeguard and promote the welfare of the child.

First signature: _____ Second signature: _____

Name in full: _____ Name in full: _____

Date: _____ Date: _____

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Registered Office: Warwick School, Myton Road, Warwick CV34 6PP

WISF - The Kingsley School Fees A/C
Sort Code: 30-99-15
Account Number: 31431268
Reference: Pupil’s initial and surname

For International Registrations only:
IBAN: GB70LOYD30991531431268
BIC: LOYDGB21285