



Dominican Convent High School

REGISTRATION FORM

FORM 1 - 2015

Email Address : dchscool@gmail.com

Website : www.conventhighbulawayo.org

Application for admission can be made by completing this Form and returning it together with copy of birth certificate. US\$50 admission fee. **ACCEPTANCE OF THE FORM DOES NOT NECESSARILY GUARANTEE THERE WILL BE A PLACE.** Registrations will be considered in the order they are received. Offers of places are subject to availability and the admission requirements of the School at the time offers are made.

A copy of the child's Birth Certificate, Current School Report and Baptism Certificate (if Catholic) must be attached

PLEASE USE BLOCK CAPITALS AND BLACK / BLUE INK THROUGHOUT

A : PARTICULARS OF APPLICANT

Child's Surname _____

Forenames _____ Religion _____

Permanent Address _____

Date of Birth _____ Place of Birth _____ Nationality _____

Present School: _____

Present School Address & Tel No : _____

B : DETAILS OF PARENT/S

Father's Name _____ Religion _____

Home Address _____

Home Tel No. _____ Cell No. _____

Business Address _____

Bus Tel No. _____ Occupation _____ Email _____

Mother's Name _____ Religion _____

Home Address _____

Home Tel No. _____ Cell No. _____

Business Address _____

Bus Tel No. _____ Occupation _____ Email _____

Marital Status of Parent please tick:

Single

Married

Divorced

Widowed

With whom does the applicant reside? _____

NB : COMPLETED FORMS MUST BE RETURNED NO LATER THAN MON 31 MARCH 2014

C : DETAILS OF GUARDIAN

Guardian's First Name : _____ Guardian's Surname _____

Guardian's Residential Address: _____

Home Tel : _____ Cell No. _____ Email Add : _____

Business Address : _____

Business Tel : _____ Occupation : _____

Marital Status of Guardian :

Single

Married

Divorced

Widowed

Relationship of Guardian to Applicant : _____

Please mention the names of any other members of the family attending or registered at either the school or any other connection with the school :

1. _____

2. _____

Please state how you first heard of the School.

Local Reputation

Present School

Friends

Other (Please give Details)

Declaration

We request that the name of the child's name overleaf be registered as a prospective pupil. We understand that the standard Terms and Conditions of the School will undergo changes from time to time as circumstances require and will apply in all our dealings with the School and that we will be subject to any changed Terms and Conditions.

This declaration must be signed individually by all persons who have parental responsibility

First Signature _____ Second Signature _____

Name in Full _____ Name in Full _____

Relationship to child _____ Relationship to child _____

Date _____ Date _____

REPORT ON _____
BY THE PRINCIPAL OF THE LAST SCHOOL ATTENDED

Form : _____

General Academic Ability _____

English _____

Mathematics _____

Do you consider her capable of passing G.C.E 'O' Level Examination? _____

Position in Class _____ Number in Class _____

Conduct _____

Application _____

Signed _____

Date _____

School Stamp



Thank you for completing this report which, if you prefer, may be sent direct to

The Headmistress,
Dominican Convent High School
P.O.Box 530
BULAWAYO