

QUEEN'S COLLEGE



Village Road, P. O. Box N-7127
Nassau, Bahamas
Telephone: (242) 677-7600
E-Mail: info@qchenceforth.com
Website: www.qchenceforth.com

*Recent
Colour Passport
photograph
of
Applicant*

APPLICATION FOR ADMISSION

(PLEASE PRINT) In order for processing to take place, please ensure that all parts of this application are fully and accurately completed.

N.B. Due to the high number of applicants sitting and passing this exam, there is no guarantee that the applicant will be offered a space at Queen's College. Only students for whom completed application and acceptance forms are received, along with the Capital Development Fee and Seat Fee, will be considered to be enrolled. It is also important that the medical information, together with any other required forms/information be submitted in accordance with the stipulated deadline by relevant Section.

If applications are being submitted for multiple students in one family, (in addition to the student on this application form), please indicate which sections they are applying for. A separate application is to be submitted for each child.

☐ Foundation Years ☐ Primary Years ☐ High School

Please attach the following documents:

- ☐ Current Colour Passport Photo of Applicant
- ☐ Copy of Applicant's Birth Certificate
- ☐ Copy of Applicant's Passport
- ☐ Copy of current Transcript or Report Card
- ☐ Copy of Applicant's NIB Card
- ☐ Legal Document/s (if applicable)
- ☐ Copy of Driver's License or Passport for both Father and Mother

APPLICATION WILL BE CONSIDERED INCOMPLETE IF ALL REQUIRED DOCUMENTS ARE NOT SUBMITTED.

Applicant Information

Name of Applicant: _____
First Name Middle Name Family Name

Home Address: _____
House Number Street City

Country P. O. Box / Zip Code

[] Male [] Female Age _____ Date of Birth: _____ Country of Birth: _____
Month/Day/Year

National Insurance No. _____ Nationality: _____

Religion _____ Denomination _____

Home Telephone _____

Proposed Entrance _____ Current Grade _____ Applying for Grade _____
Month Year

☐ New Student / ☐ Returning Student (If Applicant is a Returning Student, please state the year and grade the student withdrew from.) Year: _____ Grade: _____

The completed application should be submitted along with the **\$100.00** Application Fee to the school's Accounts Office. This is a charge payable by all applicants and is neither refundable nor deductible from fees should the child be accepted. This fee covers the cost of processing and does not guarantee a space. **The deadline for submission of applications is on or before JANUARY 15 for ALL SECTIONS of the School.**

Applicants for Foundation Years (Reception, Phase 1 & Phase 2) should have turned the age of 2½, 3 or 4 before the 30th of June of the year in which they wish to enter Reception, Phase 1 or Phase 2 respectively. All applicants who will have reached their 5th birthday by June of their year of entry are eligible for consideration as entrants into Primary Years (Grade 1) and must take a placement test, which will be arranged after the application is processed. Applicants from Grade One and up must attach a **copy of their previous school report**, though this is not in lieu of our own placement test. Should the child be offered a seat, **two non-refundable fees are payable** — a **Capital Development Fee of \$700.00** and a **Seat Fee of \$250.00** are **both due upon acceptance of the seat**. The Seat Fee is applied towards the first term's tuition. Please note that a **LATE FEE** (presently **\$100.00**) will be applied to each student's account should tuition fees not be paid by the due date.

Applicant lives with: ☐ Father ☐ Mother ☐ Both ☐ Other _____

To whom should bills be sent? ☐ Father ☐ Mother ☐ Both ☐ Other _____

(Information on students/student records will **only be released to the parent responsible for the child's school fees (to whom bills are sent)**, as indicated on this form.)

Check if appropriate: ☐ Father is deceased ☐ Parents Married ☐ Parents Divorced ☐ Father Remarried
☐ Mother is deceased ☐ Parents not Married ☐ Parents Separated ☐ Mother Remarried

If parents are divorced or separated, who has legal custody of the applicant? _____

First language, other than English _____ Language spoken in the home _____

SHOULD THE STATUS OF PARENTS OR STUDENT CHANGE, PLEASE ADVISE THE SCHOOL IMMEDIATELY.

Information about brothers and sisters:

Name	Age	School	House (if at Q.C.)
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Name	Age	School	House (if at Q.C.)
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Name	Age	School	House (if at Q.C.)
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Names/class years/houses of relatives who attended Queen's College: Relationship:

_____	_____
_____	_____
_____	_____

Education

Present School Name _____ Dates of Attendance _____

Address _____
Street City Country

Principal _____ Tel _____ E-mail _____

Other schools attended in the past three (3) years:

School	Name	City	Dates of Attendance
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School	Name	City	Dates of Attendance
--------	------	------	---------------------

Should we be aware of any learning style needs or medical history that might interfere with the student's normal performance in regular classes or in the athletic programme? _____

Referral

Were you referred to Queen's College? If so, please list name and number of person who referred you.

Name: _____ Telephone: _____ E-mail: _____

Family Information

Father

Name _____
First Name Family Name Nationality

Home Address: _____
House number Street City

P. O. Box _____ Telephone _____ Cell _____

E-Mail Address _____ Religious Denomination _____
(PERSONAL E-MAIL PREFERRED, INSTEAD OF A BUSINESS E-MAIL.)

Place of Employment _____ Position _____

Business Address _____ Telephone _____ E-mail _____

Mother

Name _____
First Name Family Name Nationality

Home Address: _____
House number Street City

P. O. Box _____ Telephone _____ Cell _____

E-Mail Address _____ Religious Denomination _____
(PERSONAL E-MAIL PREFERRED, INSTEAD OF A BUSINESS E-MAIL.)

Place of Employment _____ Position _____

Business Address _____ Telephone _____ E-mail _____

Legal Guardian (If applicable) (Supporting documentation to be submitted with this application.)

Name _____
First Name Family Name Nationality

Home Address: _____
House number Street City

P. O. Box _____ Telephone _____ Cell _____

E-Mail Address _____ Religious Denomination _____

Place of Employment _____ Position _____

Business Address _____ Telephone _____ E-mail _____

Emergency Contact: Name, address and telephone number of a person to be contacted in case of an emergency (in case parents/guardian cannot be reached).

Name: _____ Address: _____

Telephone (H): _____ Telephone (C): _____ Telephone (W): _____

Relationship to student: _____

General Conditions of Enrollment

1. Queen's College is a Methodist school operating under the auspices of The Division of Education & Training of The Bahamas Conference of the Methodist Church.

Parents/Guardians and children of other faiths must be prepared to accept this position and must not expect the school to make any compromise. While Queen's College is open to students of all faiths, this is subject to the acceptance of the position expressed above. In particular, the following conditions must be agreed and accepted:

- Attendance at assemblies, religious services/functions and national events, sanctioned by the school, is mandatory.
- Religious Education is compulsory for all students throughout their career.
- There must be full compliance with our discipline and uniform codes.
- Students are not to attempt (overtly or covertly) to convert others to their faith.

2. Notwithstanding the right of each party to terminate this contract immediately for cause, the school has the right, at its discretion, upon reasonable suspicion of a criminal or otherwise disorderly act by the student named in this application which endangers the order or discipline on campus, to search the belongings and clothes of the said student and to put in safe keeping any objects found which are suspected of being used in connection with such a criminal or disorderly act. In any case of denial of this right, the school shall be entitled to terminate this contract immediately for cause.

Furthermore, in any such instance of the suspected commission by a student of a criminal or otherwise disorderly act, the school has the right to take any disciplinary action considered appropriate in its discretion, including expulsion of the student from the school.

3. We understand that tuition and fees are determined annually and are paid prior to the start of each term, and normal payment dates are

approximately 30th June (1st term), 1st December (2nd term) and 1st March (3rd term). We hereby declare that we are financially able to pay the fees required for this child. We realize that there will be no refund of tuition for instructional days lost due to reasons beyond the school's control. We understand that a **LATE FEE (presently \$100.00)** will be applied to each student's account should tuition fees not be paid by the due date.

4. We understand that information on students/student records will only be released to the parent responsible for the child's school fees (to whom bills are sent), as indicated on this form.

5. It is agreed that notwithstanding the year level for which application is made, final acceptance and year placement is at the discretion of the administration. A child must be at least 2½ years of age on or before 30th June of the year of entry for entrance into Foundation Years (Reception); at least three years of age on or before 30th June of the year of entry for entrance into Foundation Years (Phase 1) and at least four years of age on or before 30th June of the year of entry into Foundation Years (Phase 2). This normally follows in a progression through the school so that, for example, a child entering Grade 7 is usually expected to be at least 11 years old by 30th June of the year of entry.

6. We give consent for this student to receive on-campus medical treatment, unless otherwise specified.

7. We agree to seek arbitration, as the first course of action, should a legal matter arise.

8. We give consent for this student to be photographed and recorded via video for school digital and print marketing purposes.

9. We have given accurately, and completely, all the information requested by the school. We, and the student named in this application, agree to abide by all school policies, rules and requests, **both written and unwritten**, approved by the Board of Governors. We accept that violation of such policies will also allow the school to terminate this contract for cause.

We have read the general Conditions of Enrollment outlined above and agree and accept the same. If we withdraw this child from Queen's College prior to graduation, we agree to provide one full term's notice, in writing, or if we fail to give such notice, we will pay a term's fees in lieu of notice, and we understand that we will not receive any student records until such notice is given or payment is made. (The notice period does not include the months of July and August.)

This application, when signed, constitutes a contract, subject to the laws of The Commonwealth of The Bahamas. Intentionally providing incorrect information can lead to the school's termination of this contract.

Name of Mother/Guardian: (Please PRINT)

Mother/Guardian's Signature:

Date: _____

Proof of Identification of Mother/Guardian:

(Please submit a copy of Passport or Driver's License) _____ P/P or D/L Number

Name of Father/Guardian: (Please PRINT)

Father/Guardian's Signature:

Date: _____

Proof of Identification of Father/Guardian:

(Please submit a copy of Passport or Driver's License) _____ P/P or D/L Number

FOR USE BY ACCOUNTS OFFICE

Name of student:	Application Number:
<input type="checkbox"/> Completed Application received	Date: _____ Received by: _____
<input type="checkbox"/> Colour Passport Photo attached	
Documents attached: <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport <input type="checkbox"/> NIB Card <input type="checkbox"/> Transcript <input type="checkbox"/> Report Card <input type="checkbox"/> Legal Document/s (if applicable) <input type="checkbox"/> Driver's License or Passport (Father) <input type="checkbox"/> Driver's License or Passport (Mother) <input type="checkbox"/> Application Fee of \$100.00 received	
	Finance Manager's Signature: _____

FOR USE BY SECTION

Interview / Contact made by:	Date: _____ Called by: _____
Testing / Appointment date:	

RECOMMENDATION

<input type="checkbox"/> Accept	<input type="checkbox"/> Accept provisionally	<input type="checkbox"/> Wait list	<input type="checkbox"/> Do not accept
Date: _____	Administrator's Signature: _____		