REGISTRA	TION FORM	Registration #
DAY S	CHOOL	
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INSTITUTE OF ACADEMIC EXCELLENCE GRA		
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RESPECTFUL, RELIABLE RESPONSIBLE, RESILIENT		
PLEASE COMPLET	IN BLOCK CAPITALS	
	please complete each section accura	tely
	on will be placed on your records	
1. PERSONAL DETAILS OF STUDENT:		
NAME Surname	First Name	Middle Name
GENDER: (Please tick appropriate box) DATE OF BIRTH:		TELEPHONE NO. (Home)
MALE FEMALE DD MM	AGE:	(592)
ויוויז שש		TELEPHONE NO. (Cellular- Digicel)
NATIONALITY:		(592)
HOME or MAILING ADDRESS:		TELEPHONE NO. (Cellular - Other)
		(592)
	EARS ATTENDED	LAST GRADE COMPLETED
F	rom: To	
2.COMMON SCORES ACHIEVED: Grade 7 students ONLY	rom:	
2.COMMON SCORES ACHIEVED: Grade 7 students ONLY		Social Studies
2.COMMON SCORES ACHIEVED: Grade 7 students ONLY         Other       English	matics Science	
2.COMMON SCORES ACHIEVED: Grade 7 students ONLY         Other       English         Mathe         3. PERSONAL DETAILS OF PARENT/GUARDIAN (1 <sup>ST</sup> )	matics Science	ILS OF PARENT/GUARDIAN (2 <sup>ND</sup> )
2.COMMON SCORES ACHIEVED: Grade 7 students ONLY         Other       English       Mathe         3. PERSONAL DETAILS OF PARENT/GUARDIAN (1 <sup>ST</sup> )         Mr.       Mrs.       Miss       (Please tick appropriate box)	matics Science           4. PERSONAL DETAI           Mr.         Mrs.	
2.COMMON SCORES ACHIEVED: Grade 7 students ONLY         Other       English         Mathe         3. PERSONAL DETAILS OF PARENT/GUARDIAN (1 <sup>ST</sup> )	matics Science	ILS OF PARENT/GUARDIAN (2 <sup>ND</sup> )
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2.COMMON SCORES ACHIEVED: Grade 7 students ONLY         Other       English       Mathe         3. PERSONAL DETAILS OF PARENT/GUARDIAN (1 <sup>st</sup> )         Mr.       Mrs.       Miss       (Please tick appropriate box)         FULL NAME:	matics Science  4. PERSONAL DETAI  Mr Mrs  FULL NAME:  Surname	ILS OF PARENT/GUARDIAN (2 <sup>ND</sup> )         Miss       (Please tick appropriate box)         First, Middle
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2.COMMON SCORES ACHIEVED: Grade 7 students ONLY         Other       English       Mathe         3. PERSONAL DETAILS OF PARENT/GUARDIAN (1 <sup>ST</sup> )         Mr.       Mrs.       Miss       (Please tick appropriate box)         FULL NAME:	Mattics       Science         4. PERSONAL DETAI         Mr.       Mrs.         FULL NAME:         Surname         HOME/ MAILING ADDRE         EMAIL ADDRESS:         OCCUPATION:	ILS OF PARENT/GUARDIAN (2 <sup>ND</sup> )         Miss       (Please tick appropriate box)
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2.COMMON SCORES ACHIEVED: Grade 7 students ONLY         Other       English       Mathe         3. PERSONAL DETAILS OF PARENT/GUARDIAN (1 <sup>ST</sup> )       Mr.       Mrs.       Miss       (Please tick appropriate box)         FULL NAME:	matics       Science         4. PERSONAL DETAI         Mr.       Mrs.         FULL NAME:         Surname         HOME/ MAILING ADDRE         EMAIL ADDRESS:         OCCUPATION:         CONTACT NOS.: (Work)         PELATIONSHIP TO STUE         Mother         Father	ILS OF PARENT/GUARDIAN (2 <sup>ND</sup> )         Miss       (Please tick appropriate box)         First, Middle         ESS:         (Cell)         Other       specify         CONTACT NO. (Cell)         (592)
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7. SUBJECTSS:						
Mathematics		Social Studies		Religious Education		
Spanish		ntegrated Science		Physical Education		
EDPM		nformation Technology		History		
English A		Visual Arts				
8. FINANCING:	(*NB – Regist	ration Fee and Scho	ol fee paid	are NON-REFUND	ABLE)	
Amount being paid w	ith this application			Cash Chequ	e Debit Card	Credit Card
TERMS OF PAYMEN	T: Please select p	payment option:	Full Paym	ient	Payment Plan	
PAYMENT PLAN:						
	rred way is that	all fees are paid in ful	l at registral	tion.		
				OR		
<ul> <li>50% at re installmer</li> </ul>		ne balance may be pai	id in three (	3) equal monthly		
		rms of payment: Parent's	/ Sponsor's Sig	enature	Date:	
9. DOCUMENTS/	÷		1 0	, 		
1. Registration 2. One (1) pass	Checklist port-size picture		ters of Reco zation Card	mmendations	7. SSEE Slip (cop 8. ID of School F	
3. Birth Certific			Report (com			
10. OTHER:			F			
HOW DID YOU HEAR	ABOUT IAE ?	Friend	or relative	Television	Newspapers	Instagram
		Schoo	ol Website	WhatsApp	Other	
	h the school rules, htry. I also agree t	<b>ATES THAT</b> : payment policies and re o give one term's writter				
Parent's/Guardian's S	Signature:				Date:	
13.	Turreier		OFFICE US		Dessint #	Belance Due (t)
Date	Invoice	# Total (	₽) /	Amount Paid (\$)	Receipt #	Balance Due (\$)
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	Check the web-	site often at <b>www.institute</b>	ofacademicexc	ellence.com for notices, o	calendar events, rules and	

updates