Place photo here



REGISTRATION FORMDay /Afternoon / Evening

PLEASE COMPLETE IN BLOCK CAPITALS

In order for us to serve you better, please complete each section accurately so that the correct information will be placed on your records

REG'N #	
GRADE LEVEL: please tick appropris	ate box
5 th Form	
4 th Form	
3 th Form	

	So	that the correct information wil	l be placed on your re	ecords				
1. P	ERSONAL DETAILS OF STUDENT:							
NAM			First Name			Middle Name		
<i>(Pleas</i> Mr.	e tick appropriate box) Mrs. Miss	DATE OF BIRT	AGE:		SLEPHONE N	NO. (Home)		
NATI	ONALITY:	SRN #			TELEPHONE NO. (Cellular- Digicel)			
НОМ	E/MAILING ADDRESS:				592)			
					592)	NO. (Cellular - (Other)	
EMA	IL ADDRESS:							
NAME	OF CURRENT/PREVIOUS SCHOOL		PERIOD	OF ATTEN	DANCE			
			From:			То		
2. NE	XT OF KIN: (closest living relati	ve)						
Mr.	Mrs. Miss Full	NAME:		N.	ATIONALIT	Y:		
RELATIONSHIP TO STUDENT: Mother Father Sister Brother Other				CONTACT NO. (Cell) (592)				
HOME/MAILING ADDRESS				CONTACT NO. (Home/Other) (592)				
EMA:	IL ADDRESS:			occi	JPATION:			
WOR	KPLACE:			DEPA	RTMENT: _			
3. SC	HOOL FEE SPONSOR: (Person re	sponsible for paying sch	ool fee)					
NAME (DF SCHOOL FEE SPONSOR			CONT	ACT NO.	- [
COMPA	NY NAME:	OF	FICE ADDRESS:					
EMPLOYI	MENT DURATION Yrs.	Mths.	FROM:		_ т	0:		
4. EX	AMINATION RECORD: Subject p	asses at CSEC/CAPE						
	SCHOOL	SUBJECT	/S	CSEC	CAPE	YEAR	RESULT	
1.				3323				
2.								
3.								
4. 5.								
6.								
7.								
8.								
9.								
10.								
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5. CSEC SUBJECT	CHOICES: Evening	(Please tick to select s	ubject choices)		
1. CSEC Biology		4. CSEC EDPM		7. CSEC Principles o	f Accounts
2. CSEC Chemistry		5. CSEC Mathematics	5	8. CSEC Principles of	of Business
3. CSEC English A		6. CSEC Physics			
1. CSEC Office Ac	<u> </u>	4. CSEC Social Studi	_		
 CSEC English I CSEC Econom 		CSEC Human & So Biology	ociai		
		tional time will be re	quired		
		ION FOR CAPE/ CSEC EXAM		YES NO	
8. FINANCING:	(*NB – Registration	Fee is NON-REFUNDA	ABLE)		
Amount being paid wit	th this application \$		Cash	Cheque Debit Card	Credit Card
TERMS OF PAYMENT	Γ: Please select paymer	nt option: Full P	ayment	Payment Plan	
PAYMENT PLAN:					
• The pre	ferred way is that all fe	ees are paid in full at re	gistration.		
			OR		
• 50% at	registration and the ba	alance maybe paid in th	ree (3) equal mor	thly installments.	
I have read and hereby a	gree to the above terms of p	ayment: Parent's/Sponsor	's Signature	Da	ıte:20
9. DOCUMENTS/1	TEMS REQUIRED:	(Highlighted items <u>M</u>	<u>UST</u> accompany o	completed Registration	Form)
	port-size picture	III. ID of School Fee	· <u>=</u>	V. Previous Candida	<u> </u>
II. Birth Certific	ate	IV. CSEC/CAPE/GCE	Certificates	VI. Previous SBA sco	res
				VII. Two (2) Recomme	endation
10. OTHER					
HOW DID YOU HEAR A	ABOUT QUALITY ACADEMI	ICS? Friend or relativ	ve Televisio	n News. Classified	Instagram
		School Websi	te WhatsAp	p Other	
COMPLETION OF	TUTO FORM THREAT		WildesAp	р 🔲 — отнег	
	THIS FORM INDICATE the school rules, payment p	= -	s as outlined by the sch	ool. Any falsification of data w	ill disqualify me from
entry. I also	agree to give one term's wr	ritten notice for the refunding	g of fees before withdro	awing myself/ any child/ward fr	om the school.
Student's Signature:				Date:	20
Parent's/ Guardian's Sig	gnature:			Date:	20
11.		FOR OFFICE	USE ONLY		
Date	Invoice #	Total (J\$)	Amount Paid (J	\$) Receipt #	Balance Due (J\$)
			i		1
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 $\label{lem:June 2020. One of the continuous subjects programmes that are not viable. Kindly email all enquiries to $$iae.learn 2020 gmail.com$$$

VISIT US AT

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Tel. (592) 683-5742

Check the web-site often at www.instituteofacademicexcellence.com for notices, calendar events, rules and updates.