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www.brookhillsmontessorischool.com

Whatsapp or Cell: 267 7286 9302, 267 7559 269

T: 267 3969978

Student Admission Application Form

Application for	or A	ge Group:	Year				Term						
Student Details: PLEASE PRINT CLEARLY													
Surname				F		First Names							
DOB			Allergies					Boy	Boy/Girl				
Nationality				Present School									
No. Siblings at Brookhills				Since (year)									
No. Siblings le				Special Needs									
Parent/Guardian Details:													
Father	Surname					First Name							
Place Of						•							
Employment													
Job Title						Nationality							
Home Tel				Work Tel				Cell					
Postal Addres	ss					Botswana since							
			(year)										
Residential													
Address													
Email Addres	S												
Mother Surname							First Na	ame					
Place Of							Maider	1					
Employment						Name							
Job Title						Nationality							
Home Tel				Work Tel					Cell				
Postal Address		F				Resident in Botswana							
					since	since (year)							
Residential													
Address													
Email Address													
Required Documents													
Birth			Vaccir	nation				Previo	us Scho	ol			
Certificates	Certificates Attached			Card		Attached I		Report Attached				ached	



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Admission to Brookhills Montessori School

Requirements:

- A registration fee of P250 is payable at the time of application and P150 Annual Montessori Fee on admission.
- A copy of the birth certificate must be submitted at the time of application.
- We will require proof of vaccination.
- No child will be admitted to school unless all relevant fees have been paid.
- Should a place be offered, a non-refundable Fee deposit is payable to secure the offer

Validity of Application.

Name

This application is valid for a period of **12 CALENDAR MONTHS** from the date of application. If a child has not been placed within that time, you the parent must complete a fresh application form and submit it to the school. **PLEASE NOTE: THE REGISTRATION FEE IS ONLY PAYABLE ON THE INITIAL APPLICATION.**

I HAVE READ AND AGREE TO ABIDE BY THE REQUIREMENT ABOVE.

Today's Date								
Signature								
This application I	DOES NOT GUARANT	TEE a place in the school	l. Places will be allocated in str	ict				
accordance with	the school's admission	ons policy. You will be c	ontacted by the Admission Off	ice				
to arrange a time for an assessment of your child if necessary.								
		Receipt No	Date					
Schoo	ol Stamp							