## **OUR LADY OF MOUNT CARMEL HIGH SCHOOL**

APPLICATION FOR ADMISSION for Academic Year \*Benque Viejo \* Phone:+501-823-2535; +501-823-2331 +501-670-2535 \* E-mail: secretary@mchs.edu.bz Dear Applicant: **OFFICIAL USE ONLY** 1) Along with this application form, should be Date: submitted the following: Received by: i. Std V&VI Report Cards OR Photo Transcript (for transfers) Receipt No.: ii. Social Security ☐ Application ☐ Registration iii. Birth Certificate iv. 2 Recommendations ☐ New ☐ Transfer In ☐ Returning v. 1 Photo- Passport Size Accepted Not Accepted Conditionally Accepted 2) New students pay an Application Fee of \$10.00. Upon acceptance, a **Potential** English Math Registration Fee of \$40.00 is payable to the office. Remedial 3) Non-Belizean Students are required to pay an additional fee of \$500 Class (five hundred dollars) per academic year. 4) 1st Form students pay \$100.00 for a summer course, 29th June – 10th Scholarship Rural Academic Sports July, 2020. (Students must attend in their Primary School uniform.) ☐ Working ☐ Other: **Program** 5) ALL DOCUMENTATION MUST BE SUBMITTED TO THE OFFICE ON THE DUE DATE. 6) MCHS reserves the right to refuse admittance to any student who was Comments released from any other school because of misconduct or whose admission is deemed to be against the best interest of the school. Approved by: Date: STUDENT'S INFORMATION Country of Birth: \_\_\_\_\_\_ Nationality:\_\_\_\_\_ Gender: Male | Female Date of Birth: \_\_\_\_/ \_\_\_ Age: \_\_\_\_ Social Security#:\_\_\_\_ Address: \_\_\_\_/\_\_\_Village/Town/City Feeder School: Religion: 

Catholic 
Other: English \_\_\_\_ Science \_\_\_ PSE Average: \_\_\_\_ Math Social Studies Please specify any **medical problem(s)** that the school should Please specify any **special need(s)** that the school should know about your person (Use a separate sheet if a detailed know about your person. (Use a separate sheet if a detailed explanation is necessary.) explanation is necessary.) STUDENT'S TRANSFER-IN INFORMATION (THIS SECTION IS FOR OFFICIAL USE ONLY) Former School: Former School Address:

Form Completed: \_\_\_\_\_ Form Entering: \_\_\_\_

## PARENT/GUARDIAN INFORMATION

## **FATHER'S INFORMATION** Name :\_\_\_\_\_ Address: Occupation:\_\_\_\_\_ Phone No.\_\_\_\_ E-mail: \_\_\_\_\_ **MOTHER'S INFORMATION** Address: \_\_\_\_ Occupation: Phone No. E-mail: **EMERGENCY CONTACTS** Name **Relationship to Student** Phone No. \* Kindly keep the office updated with current contact information so that we may best serve you. AGREEMENT OF APPLICANT I have read the information on this form and certify that all the information presented herein is true and complete to the best of my knowledge. If I am accepted at Our Lady Of Mount Carmel High School, I shall: 1. Become familiar with the rules, regulations, and policies of the school as outlined in the MCHS Students' Handbook. 2. Adhere to all rules and policies and understand that if I break the rules, I will suffer disciplinary consequences including being asked to withdraw or lose the privilege of participating in graduation activities. 3. Be a part of the school's activities by attending school functions. 4. Ensure to bring all required textbooks and other materials to school. 5. Pay or arrange for payment of all fees. Name of Applicant: Date: (PLEASE PRINT) Signature of Applicant: **AGREEMENT OF PARENT/GUARDIAN** I have read the information on this form and certify that all the information presented herein is true and complete to the best of my knowledge. If my child is accepted at Our Lady Of Mount Carmel High School, I shall: 1. Become familiar with the rules, regulations, and policies of the school as outlined in the MCHS Students' Handbook. 2. Support the school's enforcement of all rules and disciplinary actions. 3. Be a part of the school's activities by attending parents' meetings and other school functions and supporting school endeavours. 4. Maintain a constant line of communication with the school for the benefit of my child. 5. Ensure to provide my child with all required textbooks and other materials for school. 6. Pay or arrange for payment of all fees. Name of Parent/Guardian: Date: (PLEASE PRINT) Signature of Parent/Guardian: