Munro & Dickenson Trust

HAMPTON SCHOOL

Malvern P.O., St. Elizabeth

876-966-5161/3; hamptonschool.high.seh@moey.gov.jm

ADMISSION FORM

Kindly submit the following documents with the completed Admission Form:

1 Birth Certificate (Original & Copy)
2. Immunization Card (Original & Copy)
3. Last Report from school previously attended (Original & Copy)
4. Two (2) passport size photographs
5. Recommendation from Principal/Teacher of previous school
6. Medical certificate (form to be collected at Hampton School)
7. Student Registration Number (SRN) Card (Copy)
8. Boarding Application Form
9. Club Selection Form

Name of Student:			
Boarder □ [Not Guaranteed]	Day Student □		
Date of Birth:		Nationality:	
Proposed Term of Entry:		Grade:	
Name of Previous School:			
Name of Parent/Guardian:		Relation:	
Address:			
Occupation:			
Tele No.:	Email Add	ress:	
Name of Parent/Guardian:	Relation:		
Address:			
Occupation:			
Tele No.: Email Addre		ress:	
Religious Denomination (of Parent/Child):			
Other Contact Persons/Numbers in Case of	Emergency:		
Name:	Relation:	Tele No.:	
Name:	Relation:	Tele No.:	
Telephone Number to receive Text Messa	ages from Hampton School:		
If my daughter is admitted to the School, we	e agree to be bound by such ru	les and regulations as may be in force at t	the School
throughout her school career.			
Signature (Parent/Guardian)		Date:	
Signature (Student)			

Revised June 2020