



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 this completed Admission Form:

- 1 Birth Certificate (**Certified Copy**)
2. Immunization Card (**Certified Copy**)
3. Last Report from school previously attended (Original and Copy)
4. Two (2) passport size photographs
5. Recommendation from Principal/Teacher of previous school
6. Students Medical Report & Medical Consent Form
7. Student Registration Number (SRN) Card (Copy)
8. Club Selection Form
9. Boarding Application Form (If necessary)

Name of Student: _____ Grade: _____

Date of Birth: _____ Boarder: ☐ [Not Guaranteed] Day Student: ☐

Nationality: _____ Proposed Term of Entry: _____

Name of Previous School: _____

Name of Parent/Guardian: _____ Relation: _____

Home Address: _____ E-Mail: _____

Occupation: _____ Tel. No.: _____

Name of Parent/Guardian: _____ Relation: _____

Home Address: _____ E-Mail: _____

Occupation: _____ Tel. No : _____

Religious Denomination (of Parent/Child): _____

Other Contact Persons/Numbers in case of emergency:

Name: _____ Relation: _____ Tel. No.: _____

Name: _____ Relation: _____ Tel. No.: _____

Tel. No. to receive Text Messages (SMS) from Hampton School: _____

If my daughter is admitted to the School, we agree to be bound by such rules and regulations as may be in force at the School throughout her school career.

Signature (Parent/Guardian): _____ Date: _____

DD/MM/YYYY

Signature (Student): _____