



HOSANNA PREPARATORY SCHOOL

9 Coke Ave, Brandon Hill

Montego Bay, St. James

Telephone: 876-971-2233 / 952-2234 / 579-4499

Email: hosannaprepschool@hotmail.com

APPLICATION FORM

Child's Demographic Information

Surname _____ First name _____

Middle name (s) _____

Date of Birth _____ Sex _____

Previous School (s): _____ Length of time: _____

_____ Length of time: _____

Parents' Information

Father's Name _____ Phone No. _____

Home Address _____ Occupation _____

Name of Company _____

Work Address _____ Phone No. _____

Father's Email Address _____

Mother's Name _____ Phone No. _____

Home Address _____ Occupation _____

Name of Company _____

Work Address _____ Phone No. _____

Mother's Email Address _____

Other Information

In case of emergency during school hours contact:

Doctor _____ Phone No. _____

Other person _____ Phone No. _____

Any physical health conditions that the school should know about _____

Religious Affiliation _____

My child can be given Children's Panadol or its equivalent as a first aid. Yes or No

Date of Application: _____ Signature: _____