To be filled in by a parent/guardian and sent to the Admissions Officer. A registration fee of £50 must be sent with this form. This fee is not refundable. A copy of your child's most recent school report and a recent passport-sized photograph must also be submitted with this form. Please bring your child's passport so that we can obtain a copy for identification purposes.

Name				
Date of birth				
Current School/Nursery			Current class	
Nationality		First language		
Number of sisters	Number of brothers		Position in family	

Are you applying from outside of the UK? **Yes No**Do you intend to apply for a means-tested Bursary Award? **Yes No**(Further details about Bursary Awards: www.st-margaret.aberdeen.sch.uk/fees-and-funding)

Parents'/guardians' details

Title	Title
Name	Name
Relationship to child	Relationship to child
Address	Address
Telephone Numbers and email	Telephone Numbers and email
Home	Home
Work	Work
Mobile	Mobile
E-mail	E-mail
Occupation	Occupation
Nationality	Nationality

Previous Education

Name of School(s)/Nurseries(s)	
Dates Attended	

Proposed date and class of admission:

Any sister/relative who has attended/attends the school:

Where did you hear about the school?

amendment from time to time.

OFFICE USE ONLY

17 Albyn Place, Aberdeen, Scotland AB10 1RU T. +44 (0)1224 584466 F.+44 (0)1224 585600

www.st-margaret.aberdeen.sch.uk

Please detail any disability or medical condition, allergy or other circumstances, which may require the pupil to be given special assistance at school, or of which you think the school should be made aware of.

Dischility	
Disability	
Medical condition or allergies	
at this time. It is important, in the	ight any other information to which you would like to draw our attention ne interest of the child, for parents to advise the school of any learning uding details of learning support your child received at their previous
Extra-curricular activities (pleas	e list applicant's interests, sports and hobbies).
date specified overleaf. 2. I/we enclose a non-refundable application Bank transfer to: Royal Bank of Scotla 3. I/we accept that this application is subjeted school as such policy is from time to time I/we recognise that there is no obligation school; and; 5. Authorise the pupil's current school name current school and (b) disclose to the sedisclose this application and authorisation. 6. Children coming to the school for assessin advance. The full fee of £50 per child	n on the school to offer a place at the school for the pupil or to accept the pupil as a pupil of the ned overleaf to (a) confirm to the school whether all fees in respect of the pupil have been paid to the school information on the pupil (e.g. academic report and pupil profile), and authorise the school to
Application is hereby made for the admiss	sion of:
	he rules existing from time to time is agreed. The requirement to pay all fees in advance is agreed. Are, in writing, of intention to withdraw her from the school. It is understood that if this notice is not given se remains.
Signature of both Parents or Guardians	Date
ADMISSIONS POLICY	Date
	tion, and boys into the Nursery, where places are available. Entry is conditional on assessment. A ers of places are made at the discretion of the Head, in writing. Her decision is final.
For August entry, candidates are assessed in with other independent schools.	n January or February and letters offering places are sent to parents on a date in February agreed

Once admitted girls may remain at St Margaret's up to VIS provided that the school feels fully able to meet their learning needs.

Registration Fee Received

A copy of the admissions policy can be found on the school website. Paper copies are also available on request. It is subject to revision and

Signed