**Kingsway Pre-Kindergarten and Preparatory School**



10 – 12 Osbourne Road, Kingston 10

Telephone: (876)968-9179, (876)968-5225 Fax: 908-2050

E-mail Address: kingswayhighandprep@gmail.com

Website: [www.kingsway.interamerica.org](http://www.kingsway.interamerica.org)

“Via Regis Optima Est”

**Kinder Division Application Form for Academic Year 2023/2024**

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle Nickname

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: Male\_\_\_\_\_\_\_\_\_\_\_\_\_ Female\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Telephone: Allergy(ies):

Name(s) of Sibling(s) Attending Kingsway: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Work Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Work Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child lives with: Mother\_\_\_\_\_\_\_\_\_\_\_\_\_ Father\_\_\_\_\_\_\_\_\_\_\_\_\_ Both\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Guardian: Name Telephone Email

Has child had previous nursery/school experience?\_\_\_\_\_\_\_\_ If yes, please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Needs or Accommodation (Please specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In case of emergency, other person that may be contacted: Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address Cell Number Email

**Please select class**

\_\_\_\_\_\_\_ Pre-School: 2 years old \_\_\_\_\_\_\_ Kinder 3: 5 – 6 Years old fully potty trained

\_\_\_\_\_\_\_ Kinder 1: 3 - 4 years old potty-trained **Days of Care**: Monday – Friday

\_\_\_\_\_\_\_ Kinder 2: 4 - 5 years old potty-trained

**Time:** **Pre-School**: 7:30 a.m. – 1:30 p.m. - **Afternoon Care**: 2:30 p.m. – 5:30 p.m. (Monday - Thursday)

 Kindergarten: 8:00 a.m. – 1:30 p.m. - 2:30 p.m. – 4:30 p.m. (Fridays)

**N.B. Teachers are responsible for children up to one hour after dismissal. If your child/ward is not picked up after that one hour grace period, he/she will be placed in the Afternoon Care Facility for which parents will be charged.**

I certify that all the above information for my child’s/ward’s application form is true and correct to the best of my knowledge

Parent’s/Guardian’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Documents to be submitted with Application Form:**

**2 passport size photos, original and one copy of Immunization Card & Birth Certificate,**

**Medical Certificate (form enclosed), copy of Parent’s Identification.**

**Tuition/Fees**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **Term 1****September** | **Term 2****January** | **Term 3****April** | **Annually** |
| Tuition | 56,000.00 | 56,000.00 | 56,000.00 | 168,000.00 |
| Miscellaneous Fee | 4,000.00 | 4,000.00 | 4,000.00 | 12,000.00 |
| **Total** | **$60,000.00** | **$60,000.00** | **$60,000.00** | **$180,000.00** |

***Application Form should be returned with a Registration Fee of $3,000.00. This is mandatory and is non-refundable.***

 **(Please continue overleaf)**

*I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree to have my child observe:*

*(Name of Parent/Guardian)*

1. *Propriety in speech, on and off the school campus.*
2. *Christian courtesy and mannerly conduct on all occasions.*
3. *Healthful habits which include:*
	* *Personal cleanliness*
	* *Hair neatly cut and well-groomed at all times.*
	* *Neatness in dress and personal appearance.*
	* *Observance of the rules concerning the wearing and proper care of the uniform during all school sessions.*

**OFFICIAL USE ONLY. PLEASE DO NOT WRITE BELOW**

*Name of person, if different from parent/guardian, responsible for student’s school fee and to whom financial statements should be sent (State relationship after name)*

*Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relation to child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*I/We the undersigned, agree to:*

1. *Ensure that my child/ward communicates honestly, especially during the interview (where applicable)*
2. *Plan how I will fund my child’s/ward’s education before enrolment.*
3. *See to prompt payment of school fees.*
4. *Avoid having my child/ward to be withdrawn from classes because of fees.*
5. *Become an active member of the Home and School Association.*
6. *Ensure that my child/ward maintains all the standards and principles of the school.*
7. *Respond to correspondence sent from school.*
8. *Disclose all pertinent information that will heighten my child’s/ward’s learning.*
9. *Support the measures used by the school to correct undesirable behaviour displayed by my child/ward*
10. *Withdraw my child/ward if he/she violates the school rules.*

***Signature of Parent/Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***ACCEPTED YES NO***

***PROBATION YES NO***

***SPECIAL READING SESSIONS YES NO***

***REMARKS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

 ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***DATE OF ACCEPTANCE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLACEMENT \_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**“THE KING’S WAY IS BEST”**

***PLEDGE***

***Voluntary Declaration***

*I hereby declare that I understand that an application for my child/ward to* ***Kingsway Pre-Kindergarten and Preparatory School*** *does* ***NOT*** *mean acceptance of my child/ward for admission to the school. I further declare that I understand that the application fee of three thousand dollars* ***($3,000.00),*** *to be submitted with this application form****,*** *is* ***NON-REFUNDABLE****. Therefore, even if my child/ward is not accepted by the school for admission, the sum will* ***NOT*** *be refunded to me.*

*I further declare that I understand that all documents submitted with this form become the property of* ***Kingsway Pre-Kindergarten and Preparatory School*** *and will not be returned to me. Additionally, I also declare that to the best of my knowledge, all the information provided by me, on this form, is correct and that any false or misleading information given by me will result in an automatic cancellation of this application.*

*I understand that any document required by the school to process this application, which is not submitted by the prescribed deadline, renders my application invalid. Therefore, my child/ward will not be considered for admission to* ***Kingsway Pre-Kindergarten and Preparatory School****.*

*Signature of Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*