



International Pupil Acceptance Form

1 **Student's family name:**

(As stated on passport)

Boy:

Girl:

First or given name(s):

(Please underline the name generally used)

English name (If applicable):

2 **Date of birth:**

day:

month:

year:

3 **Place of birth:**

Nationality:

Religion:

4 **Student's first language**

If English is not first language, how many years has the student spent learning English?

5 **Language of instruction at present school:**

6 **Name and address of present school:**

Date of entry to school:

Name of Head:

Please tick which course you are applying for and specify the year and intended date of entry.

	Course	Year	Term		
			September	January	April
ISC	One Year IGCSE Course	20__			
	One Term English & Academic Preparation Course	20__			
	Two Term English & Academic Preparation Course	20__			
Senior School	Two Year GCSE Course	20__		n/a	n/a
Sixth Form	Two Year A-Level Course	20__		n/a	n/a
	Five Term A-Level Course	20__	n/a		n/a
	Two Year I.B. Diploma Course	20__		n/a	n/a
	BTEC National Diploma in Design	20__		n/a	n/a

8 **Student's Father**

Father's title & full name:

9 **Student's Mother**

Mother's title & full name:

Address:

Address:

Tel: (Home)

Tel: (Home)

(Business)

(Business)

Fax: (Home)

Fax: (Home)

(Business)

(Business)

Email:

Email:

Occupation:

Occupation:

Natural Father:

Yes:

No:

Natural Mother:

Yes:

No:

If No, please indicate:

Adoptive Father:

Stepfather:

If No, please indicate:

Adoptive Mother:

Stepmother:

Pupil Declaration' (Age 13+ at entry)

How did you hear about Rossall?

Word of Mouth Web Search Old Rossallian

Direct Mail Press Advertisement Radio Advertisement Educational Agent

I wish to enter Rossall School. I agree to accept the authority of the Headmaster.

Pupil's Signature:

Name in Full:

Date:

Parent/Guardian Declaration

We understand that we must give one full term's notice, or pay one full term's fee in lieu of notice, if we wish to withdraw the above named student from Rossall School.

We agree to accept the school's Standard Terms and Conditions. The deposit of £1,250 payable to Rossall School is enclosed. This deposit is fully refundable when the pupil leaves Rossall and will be credited against their final bill. We agree to submit the pupil for such interviews, assessments and examinations as have not yet been completed.

Father's Signature:

Mother's Signature:

Name in Full:

Name in Full:

Date:

Date:

If you wish to pay this deposit using Visa, Mastercard, American Express or Debit card, please complete the following:

Name on Credit Card:

Signature:

Card No:

Expiry Date:

Issue No. (Switch or Maestro only):

Security No.:

THIS FORM, TOGETHER WITH A PHOTOCOPY OF THE CHILD'S PASSPORT OR BIRTH CERTIFICATE,
TWO PASSPORT PHOTOGRAPHS OF THE CHILD, A STAMPED ADDRESSED ENVELOPE FOR THEIR RETURN AND
A CHEQUE FOR THE DEPOSIT, SHOULD BE RETURNED TO
THE REGISTRAR, ROSSALL SCHOOL, FLEETWOOD, FY7 8JW, ENGLAND
Tel: +44 (0)1253 774260 **Fax:** +44 (0)1253 779415 **Email:**enquiries@rossallcorporation.co.uk

Organisations submitting this form on behalf of the parents should complete the section below:

Name of Organisation:

Contact Name:

Position:

We confirm that the information supplied is true, to the best of our knowledge and that we have explained the above requirements regarding notice of withdrawal, to the parents.

Signed:

Rossall School is a Registered Charity No. 526685 Authorised to sign on behalf of the above organisation