



# British West Indies Collegiate

www.bwic.tc

PO Box 338 • Providenciales • Turks & Caicos Islands • Tel: (649) 941 3333 • Fax: (649) 941 3332 • Email: bwichs@tciway.tc

## APPLICATION FORM (YEARS 6 TO 11)

APPLICATION FOR ENTRY TO YEAR \_\_\_\_\_ COMMENCING \_\_\_\_\_

Child's Full Name

Child's Citizenship

[Blank space for Child's Full Name]		
[Blank space for Child's Citizenship]	Date of Birth (day/month/year)	[Blank space]

### PARENT DETAILS

	Full Name	Country of Origin	Place of Work (if in TCI)
Father			
Mother			
Guardian			

Full Local Postal Address (for reporting and billing purposes)

[Blank space for Full Local Postal Address]
[Blank space for Full Local Postal Address]

### Contact Details

	Home Number	Work Number	Fax Number	Cellular Number	Email Address
Father					
Mother					
Guardian					

### EDUCATIONAL HISTORY OF CANDIDATE

Name and Address of Last School Attended	Dates Attended (day/month/year)	
[Blank space for Name and Address of Last School Attended]	From:	[Blank space]
	To:	[Blank space]

**NOTE:** Please include with this application form the last **THREE** school reports for your child.

Signature \_\_\_\_\_

Date \_\_\_\_\_

PLEASE RETURN THIS FORM TOGETHER WITH A NON-REFUNDABLE US\$100.00 APPLICATION FEE.

\*\* This form can be faxed or sent as an email attachment using the contact details at the head of the form \*\*