

# St. Mary's College Preparatory School

## Application for Pre-Prep Sessions

Name of Candidate (in full as on birth certificate) \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Gender \_\_\_\_\_ Religion \_\_\_\_\_ Nationality \_\_\_\_\_

Present School / Nursery \_\_\_\_\_ Dates attended \_\_\_\_\_

*(It is the School's policy to apply for a reference from the candidate's present school. Parents are expected, as a matter of courtesy, to notify the candidate's present Head Teacher of their intention to apply to St. Mary's Prep)*

Parent / Guardian (1) Name \_\_\_\_\_ Occupation \_\_\_\_\_

Address (if different from candidate) \_\_\_\_\_

\_\_\_\_\_ Telephone Number(s) \_\_\_\_\_

Email address \_\_\_\_\_

Parent / Guardian (2) Name \_\_\_\_\_ Occupation \_\_\_\_\_

Address (if different from candidate) \_\_\_\_\_

\_\_\_\_\_ Telephone Number(s) \_\_\_\_\_

Email address \_\_\_\_\_

Does the candidate have any current or former connection with the School (e.g. parent a former pupil)

YES/NO \_\_\_\_\_

If so, give name(s) and form(s) of other members of the family currently at the School

\_\_\_\_\_

Please state why you wish your son/daughter to be considered for admission to St. Mary's

\_\_\_\_\_

Are there any special circumstances of which you would like the School to be aware? YES/NO

If 'YES' please state – (such information will be treated in the strictest confidence)

\_\_\_\_\_

It would be helpful if you would indicate how you became aware of St. Mary's College Preparatory School – please circle below.

\* Parish

\* Staff

\* Current Pupil

\* Former Pupil

\* Newspaper Advertisement

\* Open Event

\* Promotional Leaflet

\* Other (please state)

# To the Headmaster

## St. Mary's College Preparatory School

I apply for Pre-Prep sessions at St. Mary's College Preparatory School on behalf of my son/daughter:

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I believe him/her to be of good character and I undertake to conform to all the Regulations of the School with regard to discipline and payment of fees.

I would like my son/daughter to join the School in \_\_\_\_\_ (please indicate year of entry)

Are there any specific needs, disabilities or circumstances you want us to be aware of? **YES / NO**

*If so, please provide details in a separate letter - such information will be treated in the strictest confidence.*

Signature \_\_\_\_\_ Parent / Guardian (1)

Date \_\_\_\_\_

Signature \_\_\_\_\_ Parent / Guardian (2)

Date \_\_\_\_\_

Please send the completed form to:

St. Mary's College Preparatory School  
The Mount  
Blundellsands Road West  
Blundellsands  
Liverpool  
L23 6TF

Tel: 0151 924 6302