

APPLICATON FOR ADMISSION TO THE SCHOOL

Please complete this form and send it to the administration of Newark School, Parisio Street Sliema, together with the child's birth certificate and the non-refundable registration fee. Registration fees and tuition fees are to be paid in advance and are not refundable. Cheques for registrations are to be payable to Newark School Malta. Payment by bank transfer can also be made. A term's notice must be given should you wish to withdraw your child for the school. Should you fail to comply, the fee for the whole term will be incurred. Should the school capriciously fail to provide tuition for the relative term, the school will be obliged to refund the last payment effected by way of tuition fees, together with an equivalent amount representing pre-liquidated damages.

Child's Information						
First name (in full)						
Last name						
Date of Birth & Gender	Boy / Girl					
Passport Number						
Passport Place of Issue						
Nationality						
Place of Birth						
Religion						
Maltese Home Address						
Proposed Date of Entry						

Is English the child's f	rirst language? Yes /	/ No			
If the answer is "No" please complete the table below:					
	Very Good	Good	Fair	A Little	
Listening					
Speaking					
Reading					
Writing					
Which language is sp	oken within the family?				

Please indicate which (if any) of the following stater	nents most closely matches your child.	
Physical disabilities (including visual / speech /		
hearing / mobility problems)		
Behavioral difficulties (including eating, sleeping		
problems, anxiety, depression)		
Does your child have any medical conditions or health		
issues that may require attention whilst at school?		
Does your child require the services of a learning	Yes / No	
support educator?	100 / 110	
If yes, please elaborate on the child's condition and		
requirements.		
Does your child have any special skills or interests?		
,		
Has your child ever been placed out of the normal age		
group for his/her age? If yes kindly provide details.		
Which subjects does your child enjoy most?		
Will your child attend Religion lessons?	Yes / No	
Kindly note that Maltese lessons are obligatory for all students.		

Parents' / Guardians' Information

In case of a sole parent / guardian having care and custody of the child, kindly inform the school accordingly by providing a copy of the documentation.

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Parent / Guardian 1	Mother	/	Father	/	Other
Full Name					
Nationality					
Passport Number					
Employer (Company Name)					
Job Position / Title					
Work Address					
Home Telephone Number					
Mobile Number (Maltese numbers are preferred)					
Email Address					
Parent / Guardian 2	Mother	/	Father	/	Other
Full Name					
Nationality					
Passport Number					
Employer (Company Name)					
Job Position / Title					
Work Address					

Home Telephone Number	
Mobile Number (Maltese numbers are preferred)	
Email Address	
School Fees will be paid by (name of payer) :	
Address for sending invoices and correspondence (if	
different to the guardian)	
I / We confirm that the information above is correct.	
Parent / Guardian 1: Signature:	Date:
Parent / Guardian 2: Signature:	Date:
Parent / Guardian 2: Signature:	Date: