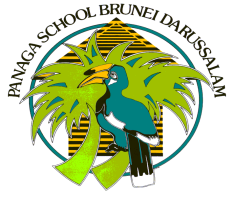


Application for Admission

Please attach recent photo here



PANAGA SCHOOL
Brunei Shell Petroleum Company Sdn Bhd, Seria KB3534

FOR OFFICIAL USE

Please type or print in black ink.
 Please complete **every section** of the form and sign on the last page.

Pupil's name (last)	(first)	(middle)
Gender	Age	Applying to enter year group
Date of birth (date) (Please write in full)	(month)	(year)
		Place of birth (country)
Nationality (pupil)	(father)	(mother)
Intended starting date at School:		

Schools attended beginning with the **most recent one**.

1. Year Group	Dates	Name	
		Address	
		Telephone	Email
2. Year Group	Dates	Name	
		Address	
		Telephone	Email
3. Year Group	Dates	Name	
		Address	
		Telephone	Email
Has the pupil ever repeated a year?		No <input type="checkbox"/>	Yes <input type="checkbox"/> (indicate which year group)
Has the pupil ever been double promoted?		No <input type="checkbox"/>	Yes <input type="checkbox"/> (indicate which year group)



BSP Panaga School

Has the pupil ever participated in an accelerated programme? No <input type="checkbox"/> Yes <input type="checkbox"/> (please give details on separate sheet)			
Has the pupil ever received any additional learning support? No <input type="checkbox"/> Yes <input type="checkbox"/> (please give details on separate sheet)			
<i>(Full disclosure is required – see Terms and Conditions of Admission)</i>			
Medical conditions, including allergies or asthma <i>(please give full details)</i>			
Language spoken at home			
Other language(s) spoken			
Pupil's proficiency in English (check one) <input type="checkbox"/> Excellent <input type="checkbox"/> Average <input type="checkbox"/> Requires English as a second language support			
Pupil's current address (if known)			
Telephone:			
Pupil's base address			
Telephone:			
Pupil resides with	Parents <input type="checkbox"/>	Father <input type="checkbox"/>	Mother <input type="checkbox"/>
(Tick all that apply)	Stepfather <input type="checkbox"/>	Stepmother <input type="checkbox"/>	Other (give details) <input type="checkbox"/>
Names and ages of other children in the family			
Father's/Stepfather's name			
Occupation		Staff Category (ESS/ETC/RTC):	
		JG/SG Group:	
Company			
Father's Department Indicator			
Business address			
Telephone	Mobile	Fax	Email
Mother's/Stepmother's name			
Occupation		Staff Category (ESS/ETC/RTC):	
		JG/SG Group:	
Company			
Mother's Department Indicator (if any)			
Business address			
Telephone	Mobile	Fax	Email



BSP Panaga School

To be completed by BSP Contract Holder (For Non – BSP Personnel)

Asset/Department (BSP) :
Contract Type:
Duration of contract:
Name of Contract Holder (BSP) :
Signature :
Date:

Invoicing information for contractors

Name and position of contact at company:
Company:
Address:
Telephone:
Fax:
Email:



Admissions Information

Admissions Procedure

Applications will be evaluated and a decision taken regarding acceptance only when all of the documents listed below have been received.

1. A completed signed Application Form together with a photograph of the pupil.
2. A complete official Transcript of the pupil's school record including the results of any standardized testing or other assessments. Parents should request an official Transcript to be sent air mail, directly to Panaga School from each school attended in the last three years.
3. Pupils entering Primary 1 – Primary 8 must provide a completed Student Reference Form from the school they currently attend.
4. The pupil's latest school report.
5. A personal interview and/or additional diagnostic testing may be requested. Additionally, further information may be requested from teachers, administrators, counselors and/or other specialists.

Terms of Admission

Please read these carefully before signing this form.

Application for Admission Acceptance Form

We/I* hereby apply for a place at the School for _____ starting during the academic year (20___/20___).
(Full Name of Child)

We/I acknowledge and agree that the Terms of Admission included in this admission pack, as varied from time to time, form part of the contract between us/me and the School. In particular, we/I agree to pay the fees and supplemental charges when due.

We/I agree that we/I and our/my child shall observe and be bound by the School Rules as varied from time to time.

Signed by: _____ Date _____
*Parent/Guardian**

Signed by: _____ Date _____
*Parent/Guardian**

[NB: Each person with parental responsibility for the child is required to sign this Acceptance Form.]



Pupil Reference Form

Please attach recent photo here



PANAGA SCHOOL

Brunei Shell Petroleum Company Sdn Bhd, Seria KB3534

FOR OFFICIAL USE

Applicants for Primary 1 – Primary 8

The pupil whose name appears below has applied for admission to Brunei Shell Petroleum (BSP) Panaga School. This reference is an important part of the application and your cooperation in providing a full and candid report will be greatly appreciated.

Please return the completed form to the Admissions Team at the school to which the pupil is applying.

Name of Pupil: _____ Applying for year: _____

Date of birth: _____

Name and address of school currently attended: _____

Name of person completing this pupil reference: _____

Position: _____

Length of time acquainted with the pupil: _____

	Never	Occasionally	Usually	Always
The pupil demonstrates self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The pupil responds positively to the challenge of academic work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The pupil is respectful and courteous to peers and adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The pupil displays a well-balanced temperament	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The pupil is able to work independently for an age-appropriate period of time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The pupil cooperates with others during group activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The pupil exhibits age-appropriate study habits and organizational ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



BSP Panaga School

Continued overleaf

1. Please write a short descriptive assessment of this pupil to include reference to the pupil's academic strengths and weaknesses, special interests and talents, character and maturity.

2. Has this pupil been recommended for and is he or she receiving any special education services and/or tutoring support? Please explain and send any relevant documentation to support this statement.

3. Have there been any disciplinary, emotional or other concerns regarding this pupil? Please explain.

Signed: _____

Date: _____

SCHOOL OFFICIAL STAMP

If you would like to give us further information over the telephone, please tick here.

Your telephone number: _____ Best time to call: _____

Your email address: _____

