

## **WESTRIDGE HIGH SCHOOL**

[Hindoo Society]

P. O. Box BE 360, Belvedere, Harare, Zimbabwe Tel: + 263 (0) 242 741876/741248/741842 Cell: 0773 093 985/6/7 SUPPLY RECENT PASSPORT SIZE PHOTO

## **APPLICATION FOR ADMISSION TO THE SIXTH FORM**

Surname:	First Names:			
Date of Birth:	ID NO:			
Religious Denomination:	Gender	Current Form:		
Proposed Date of Entry: Cur		rent School :		
Current School's Tel No. & Address:				
A. FATHER'S DETAILS ( or Guardian)		MOTHER'S DETAILS (or Guardian)		
<b>Title</b> (Mr,Dr, etc):		Title (Mrs,Ms,Dr, etc)		
Surname:		Surname:		
First Name:		First Name:		
Marital Status:		Marital Status :		
Name of Spouse:		Name of Spouse:		
Home Address:		Home Address:		
Home Tel No:		Home Tel No:		
Work Tel No:		Work Tel No:		
Cell No:		Cell No:		
Email 1:		Email 1:		
Email 2:		Email 2:		
Occupation:				
Employer/Company:				
Duration of employment:		Duration of employment:		
Company contact reference number:		Company contact reference number:		
SIBLING(S)				
Name:	Age:	Present School:		
Name:	Age:	Present School:		

Name:		Age:	Present School:	
Cousins/ot	her:	Age:	Present School:	
Signature o	f Parent/Guardian		Date:	
				1
PROPOSED	A LEVEL SUBJECT CHOICES			
OPTION 1:	i)	ii)	iii)	
OPTION 2:	i)	ii)	iii)	
OPTION 3:	i)	ii)	iii)	