

Premier Preparatory School

APPLICATION FORM

	First	Middle	Last
LEARNER'S NAME			

	YYYY	MM	DD
Date of Birth			

Class Applied for	
Former School	

Parent /Guardian - Primary	Name	First	Middle	Last
	Occupation			
	Address			
	Telephone			
	Email			
	Signature			

Parent/Guardian –Secondary	Name	First	Middle	Last
	Occupation			
	Address			
	Telephone			
	Email			
	Signature			

Do you have any siblings at PPS? YES NO

If yes, please state their full names and grades/classes they attend:

	Full Name	Grade/Class
1.		
2.		

	Village	Town/City	District:
Area of Residence			

Emergency Contact:	Name	First	Middle	Last
	Address			
	Telephone			
	Email			

Parent/Gurdian's Signature Date: