CROSS KEYS HIGH SCHOOL
P.O. Box 1794, Cross Keys, Manchester

NEW STUDENTS REGISTRATION FORM


Attach photo

SECTION A

NAME: Stewart (Surname) Giovanni (First Name) Aman (Middle)

SEX: MALE (✓) FEMALE ( ) DATE OF BIRTH: 04/05/08

BIRTH CERTIFICATE PROVIDED: YES (✓) NO ( ) #. ON BIRTH CERTIFICATE: AA431

PRESENT ADDRESS: S/A

DISTANCE FROM SCHOOL: ____ LAST SCHOOL ATTENDED: Excelsior High

DATE OF LEAVING LAST SCHOOL: ____ GRADE ON LEAVING LAST SCH.: 8

SECTION B – FAMILY DATA

MOTHER'S NAME: Soniataffe Stewart
ADDRESS: 21 Hanbury Heights

EMAIL ADDRESS: ____
OCCUPATION: Social media strategist
TEL. #: 818-1194

FATHER'S NAME: Marvin Stewart
ADDRESS: S/A

EMAIL ADDRESS: ____
OCCUPATION: Lab technician
TEL. #: 344-0792

GUARDIAN'S NAME: ____ OCCUPATION: ____
ADDRESS: ____
TEL.#: ____

NO. OF BROTHERS: YOUNGER 2 OLDER: ____
NO. OF SISTER: YOUNGER 2 OLDER: ____
DATE OF REGISTRATION: 15/03/2023 DATE OF ADMISSION: 15/03/2023
PARENT'S SIGNATURE: ____

SECTION C

FOR OFFICE USE ONLY

GRADE/CLASS PLACEMENT: 3S HOUSE: Venus

PAYMENT OF FEES

SCHOOL FEE $ 10,580 AUXILIARY FEE . $ 10,550

INDICATE STUDENT'S STATUS (√)

MEDICAL COMPLETE (✓) INCOMPLETE ( )
DENTAL COMPLETE ( ) INCOMPLETE ( )
IMMUNIZATION CARD PROVIDED Yes (✓) No ( )

REGISTRATION OFFICER'S SIGNATURE: ____ DATE: 15/03/23