



## APPLICATION FOR ADMISSION TO ST MARY'S, YEARS 9-12

*Please complete all boxes in print or type*

SECTION A – PUPIL INFORMATION										
Surname										
Forename(s) (in full)										
Preferred Forename										
Home Address										
	Post Code									
Home Tel. No.										
Date of Birth	/	/				Gender: Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	
Current School						From:	To:			
Current Year	Yr 8	<input type="checkbox"/>	Yr 9	<input type="checkbox"/>	Yr 10	<input type="checkbox"/>	Yr 11	<input type="checkbox"/>	Yr 12	<input type="checkbox"/>
GL Assessment	Did your child sit the GL Assessment?      Yes <input type="checkbox"/> No <input type="checkbox"/>									
	If yes, please provide: (i) Standardised Age Score (SAS)									
	(ii) Grade									
SECTION B - FAMILY INFORMATION										
<b>FATHER/GUARDIAN</b>										
Full Name										
Home Address (if different from pupil's)										
	Post Code									
Telephone Number (s)										
Email address										
<b>MOTHER/GUARDIAN</b>										
Full Name										
Home Address (if different from pupil's)										
	Post Code									
Telephone Number (s)										
Email address										
SECTION C – REASONS FOR REQUESTING ADMISSION										
<b>Outline the reasons for requesting admission to St Mary's.</b>										
SECTION D - SUPPORTING INFORMATION										
<b>Outline the pupil's personal interests, achievements, hobbies and interests</b> (eg sport, music, drama etc.)										

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**Please complete and return along with copies of school reports and GL Results Slip (if applicable) to:  
Principal, St Mary's Grammar School, 3 Castledawson Road, Magherafelt BT45 6BE**