



For School Use
Received.....
AO.....
Entered.....

**PLEASE COMPLETE ALL SECTIONS OF THIS FORM IN BLOCK CAPITALS AND ATTACH A RECENT PHOTO**

**STUDENT INFORMATION**

Male  
 Female

Full Name .....

Date of Birth DD MM YYYY ..... Nationality(ies) .....

Country of Birth ..... Language Spoken at Home .....

Home Address .....

Street ..... Town/City .....

Country ..... Postcode/Zip Code .....

Telephone ..... Mobile ..... Fax .....  
(Please include the international dialling code for all numbers)

E-mail Address ..... Passport Number.....

**PARENT INFORMATION**

Please provide contact details of student's parents or legal guardians.

**1<sup>st</sup> Parent** ..... First Name ..... Family Name ..... Mobile No. ....

Home Address (if different to student's) .....

Work (Name and Address) .....

Nationality ..... E-mail .....

Business Tel. No. .... Relationship to Applicant .....

**2<sup>nd</sup> Parent** ..... First Name ..... Family Name ..... Mobile No. ....

Home Address (if different to student's) .....

Work (Name and Address) .....

Nationality ..... E-mail .....

Business Tel. No. .... Relationship to applicant .....

Address for Correspondence (international students only - prior to arrival in the UK) .....

Emergency Contact Name and Number .....  
(Please provide an English-speaking contact other than the parents)



**ASHWICKE HALL SCHOOL APPLICATION INFORMATION**

Anticipated Start Date ..... Application for Year Group/Grade .....

*Month/Year*

Application for (please circle): DAY BOARDING WEEKLY

Do you wish to be considered for an Ashwicke Hall School Scholarship?

**CURRENT SCHOOL INFORMATION**

School Name ..... Grade/Year .....

Full Address .....

Country .....

E-mail .....

Business Tel. No. .... Business Fax. No. ....

**UK GUARDIAN INFORMATION**

*International Students Only*

Guardian ..... Mobile No. ....

*First Name*

*Last Name*

Address .....

Relationship to Applicant .....

E-mail .....

Home Tel. No. .... Business Tel. No. ....

**HOW DID YOU HEAR ABOUT ASHWICKE HALL SCHOOL?**

Source .....

Please sign to confirm all information provided on the application form is correct.

.....  
*Parent/Legal Guardian Signature* ..... *Date*

**PLEASE RETURN THIS FORM WITH A RECENT PHOTO OF THE APPLICANT TO:**

Admissions Office  
Ashwicke Hall School,  
Marshfield, Wiltshire,  
SN14 8AG, UK

Email: admissions@ashwicke.sabis.net  
Fax: (+44) 0 1225 891 011  
Phone: (+44) 0 1225 891 028

**ADMISSIONS OFFICE ONLY:**

DA Completed ..... Interview ..... Placement Class .....

Ref/Recommendations ..... SRR Sent ..... SRR Received .....

Enrolment Fee ..... Tier-4 Visa ..... CAS .....