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APPLICATION FORM

Please complete the following in block capitals

Pupil Details					
Forename		Middle name(s)		Surname	
Known As (name by which child is known if different from forename)					
D.O.B		Gender		Date Entry desired	
				mm	yy
Pupil's Main Address				City	
Postcode		Home Phone No			
Present school & address				Class	
Name & relationship of any relative who is, or has been a pupil at the school:					
Primary Contact					
Relationship		Former Pupil? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes House/Ship	
Title	Forename	Middle Name(s)		Surname	
Profession/occupation					
Mobile No		email			
Address (if different from Pupil)					
City			Postcode		
Home Phone No					
Additional Contact					
Relationship		Former Pupil? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes House/Ship	
Title	Forename	Middle Name(s)		Surname	
Profession/occupation					
Mobile No		email			
Address (if different from Pupil)					
City			Postcode		
Home Phone No					
I hereby apply for the admission of the above pupil to The High School of Glasgow and I enclose £30 in payment of the registration fee. (Cheques should be made payable to The High School of Glasgow Ltd.)					
Signature of ParentDate of application					
SENIOR SCHOOL APPLICATION ONLY I wish to apply for a bursary related to financial need. <input type="checkbox"/> (please tick if applicable)					

This form should be returned as follows:
 Pupils applying for Kindergarten to Primary 6 -
 The Head Teacher,
 The High School of Glasgow Junior School,
 27 Ledcameroch Road, Bearsden, Glasgow G61 4AE.
 Tel: 0141-942-0158; Fax: 0141-570-0020
 E.mail: adminjs@hsog.co.uk

Pupils applying for Primary 7 and above (approximately 11+) -
 The Rector,
 The High School of Glasgow,
 637 Crow Road, Glasgow G13 1PL
 Tel: 0141-954-9628; Fax: 0141-435-5708
 E.mail: admin@hsog.co.uk