



Place Passport
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Fairfield International Academy (FIA) Prep, Application for Admission

Applicant's Full Name: _____

Please indicate the school year requested for admission

2022-2023 2023-2024 2024-2025 Other _____

Date of Application: ____ / ____ / 2022

Applying to

Junior Kindergarten (age 4) * Grades 3-4 (ages 8 & 9)
 Senior Kindergarten (age 5) Grades 5-6 (ages 10 & 11)
 Grades 1-2 (ages 6 & 7) * *must be four before September 1 and potty trained*

Sex Male Female Date of Birth ____ / ____ / ____

Home Phone: _____

Applicant lives with: Both Parents Father Mother Other (relation?) _____

Family Information

Father's Name: _____

Home Address: _____

Work Place: _____

Father's email: _____

Home phone# _____ Cell# _____ Work# _____

Mother's Name: _____

Home Address: _____

Work Place: _____

Mother's email: _____

Home phone# _____ Cell# _____ Work# _____



Siblings

| Name(s) | Date of Birth | School |
|---------|---------------|--------|
| | | |
| | | |
| | | |
| | | |

Medical Information: Please indicate the child’s medical conditions by checking what applies:

- Asthma Respiratory ailments Chest problems Heart problems Headaches
Gastric problems Sting allergy Nut allergy Lactose intolerance Diabetes Sickle Cell
Skin complaints Hearing impairment Epilepsy Other Allergies

Other health issues not listed: _____

Special Dietary Needs: _____

Doctor’s Name: _____

Doctor’s Office Number: (876) _____ Doctor’s Cell Number: (876) _____

Has your child ever been a recipient of a special services program? Please check all that apply (If indicated, please provide a copy of your child’s most recent evaluation). Visual or Hearing Treatment Physical Therapy Speech Therapy Behavior Therapy

Other (please describe) _____

Prior Schooling (if applicable) Present School

School Phone # _____

Name of Director/Principal _____

Dates of Attendance _____

Current Grade Level _____

Teacher’s Name and Email address - Recommendation Required _____



List all schools attended in the past three years, if any:

General Parent and Family Information

Please comment on an aspect of your child that you consider unique or special.

What expectations do you have for your child at FIA Prep?

Does your family speak a language other than English at home? If yes, please specify.

In the case your child does not get admitted in the year selected above, would you like to be placed on a Waiting List for the following year? Yes No

How did you hear about FIA Prep?

CHECKLIST TO COMPLETE APPLICATION:

- A nonrefundable application fee of JM\$11,000 is due to complete the application process. Enrollment Fee - Payment of JM\$112,000 must be paid at the time of official acceptance.
- Please email all completed application forms to:
FairfieldPrep@FairfieldAcademyJA.com
- Please ensure that your child's teacher, if applicable, emails the completed letter to:
FairfieldPrep@FairfieldAcademyJA.com
- Application and enrollment fees may be made via cheque or direct bank deposit: **Payment via cheque:** please make cheque payable to *Fairfield International Academy Ltd.*

Payment via Bank Deposit: Sagicor (Fairview Branch, Montego Bay) **Account Name:** Fairfield International Academy **Account Number:** 55040 74 357 **SWIFT:** SAJAJMKN

Please mail Accounts@FairfieldAcademyJA.com if you have paid via bank deposit.

Name of Parent or Guardian:

Signature of Parent or Guardian:

Date: ____/ ____/ 2022

*Thank you! We will be in touch. If there are questions, please contact **Miss Reid at 876.465.6249***

Fairfield International Academy (Prep Campus) | Tel: 876.465.6249 | FairfieldPrep@FairfieldAcademyJA.com