



SPANISH TOWN HIGH SCHOOL

RETURNING STUDENTS

Student Name: _____

Class: _____

RE-REGISTRATION CHECKLIST

ON REGISTRATION DAY YOU WILL SUBMIT ALL THE FOLLOWING. PLEASE HAVE THEM READY!

- Completed Registration Form
- Completed Medical Assessment Form (completed by your doctor)
- Two (2) passport size photographs (**STUDENTS OF GRADE 10 AND 11**)
- School Development Fund Voucher
- PTA Voucher

Child is on the PATH Programme YES _____ NO _____

Child is a Ward of The State YES _____ NO _____

You will be asked to sign that you have submitted all documents. Your child/ward will not be officially admitted to Spanish Town High School or allowed to attend classes until every document has been submitted.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____