Bishops Entrance Examination for Grade 8 2019

Pupil's surname		e	ID No:	
Da Pre Na	est names te of birth esent grade me & postal			
		Tel. no	Fax no.	
Scl	hool principa	ıle-mail:		
		lmission dependent on a bursary? No	es [(Please contact the Admissions Office)	
De	etails for 2	2019 (for House allocation purposes)		
1.	Will your son enter the College as a day pupil / full boarder / weekly boarder?			
2.	Is pupil's f	ather an OD? Yes No		
3.	Any family connection with a College House? (specify House)			
4.	Names of a	and relationship to relatives previously at Bishops		
5.	. Details of other sons at currently at Bishops or waitlisted to enter (give names and years)			
6.	Father's d		Mother's details:	
	Title: (Mr/	/Dr/)		
	Name			
	Residentia	ıl address		
	Postal add	ress		
	Postal cod	e		
	Telephone	e (H)		
	Telephone	e (W)		
	Mobile:			
	E-mail:			
		n		
	_			
Sin			Date:	
SIE	511atu105	••••••	Date	

Please return by 8th March 2018, enclosing proof of EFT payment in the amount of R300, and 2017 December school report to: The Admissions Secretary, Bishops, Campground Road, Rondebosch, 7700, Cape Town.

*Race group: As we are committed to transformation and embracing diversity, we invite you to enter this information. The South African Department of Education also requires this information from us for statistical purposes.