



**WOLVERHAMPTON
GRAMMAR SCHOOL**

Inspiring excellence since 1512

Year 7, 8 & 9 Registration

Please complete this form in ink, using CAPITAL LETTERS. If you have any questions, please do not hesitate to contact the Admissions Secretary on 01902 422939.

Please attach
photograph or
email to
admissions@
wgs-sch.net

FOR ENTRY TO WGS IN SEPTEMBER _____ (YEAR)

AGE 11+ Entry at Year 7 12+ Entry at Year 8
13+ Entry at Year 9 Other
Music Scholarship Means Tested Scholarship
(If ticked further information will follow) (11+ and 13+ only)

STUDENT'S LAST NAME _____

STUDENT'S FIRST NAME(S) _____
Please underline the name she/he prefers to use

DATE OF BIRTH _____ Girl Boy

HOME ADDRESS _____
Postcode _____

TELEPHONE (Home) _____ (Mobile) _____

EMAIL _____

FULL NAMES OF PARENTS _____

CURRENT SCHOOL NAME AND ADDRESS _____

Postcode _____ Tel _____

NAME OF HEADTEACHER _____
We will contact your current school for a reference

DO YOU HAVE A SON OR DAUGHTER CURRENTLY AT WGS
Name _____ Year _____

ANY OTHER FAMILY CONNECTIONS?

Please describe any connection you have with the school (for example a relative who attends/used to attend the school).

