

BISHOP MARTIN HIGH SCHOOL

¾ Mile San Lorenzo Road, OW · P. O. Box 177 · Tel. 322-3469 / 6706279 · Web: http://www.bmhsow.edu.bz · Email: office@bmhsow.edu.bz

Application for Admission 2024-25

Dear Applicant:

- 1.) Please fill out this form completely and correctly.
- 2.) Have your parent or guardian complete and **sign** the Agreement below.
- 3.) Submit certified copies of your birth certificate or permanent residence certificate* and social security card.
- 4.) Submit copies of your Standard V and Standard VI report cards. Have your primary school principal **and** your Standard VI teacher complete the attached recommendation forms and return them to BMHS in sealed envelopes. (Note: Schools may send several recommendations together.)
- 5.) For transfer students, include an original sealed transcript from the last high school you attended and completed recommendations
- 6.) Include an **application fee** of **\$20.00**. An additional **\$10** Late Fee is charged for late applications.
- 7.) The deadline for submission of completed application packages is **FRIDAY**, **April 12**, **2024** for incoming students and **FRIDAY**, **July 5**, **2024** for transfer students.

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Applicant Sta	itus	New	Applicar	nt 🗆		Re-App	olying			Trai	nsfer	
PLEASE I	PRINT			PLEA	SE F	<u>'RI</u> N'	Γ			PL:	EAS	E PRINT
Fir	rst Name	,		Middle I	Name				Last Na	ame		Gender
												□Male ②Fema
Ho	me Address (Stre	eet, To	wn/City/Vi	illage, Dis	trict Cou	intry)					Soc	ial Security No.
	# and Street				City/	Town/Vi	lage		Dist	rict		
					,,		- 8 -		2.50	1100		
	Date of Birth	l		Na	ame of La	st Primary	or High S	School A	l Attended			Religion
DAY	MONTH		YEAR			<u> </u>	or mgm o		1001100			
Mot	ther's Name		/	Mother's	Maiden r	name				Father'	's Name	
			,	,						Tutilei	<u>s ituine</u>	
	Occupation				`elephon	e No.			Осси	pation		Telephone:
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	uardian's Full Na									Guardia	n's rela	tion to you:
										Aunt		
							- "			□Uncle □ Gran	e dparent	
Ad	ldress		Occupatio	n Te	elephone	•	Email A	Addre	SS	Other	-	
Please indicate	(with doctor's cer	rtificati	on) any me	edical prob	olems the	e school s	hould kno	ow abo	out:			
Please indicate	any physical or (certifie	d) learning	disability	the scho	ool should	l know al	bout:				
Type of Interne	t access at home							Ty	pe of dev	vice for so	chool	
☐ Wi-Fi (month) ☐ Data (via cellu ☐ None	ly Internet service) ular phone))							Laptop / Tablet	Chromebo	ook	
Person (s) or Ei	ntity Financially F	Respon	sible		000	Father O Mother C Both Pare Guardian Organizat Other	nly ents ion (Nam	ne:			_)	
THIS PART FO	OR OFFICE USE	ONLY										
Documents Sub			Date Rec	eived·								
Documents 300	mitteu		Date Net	civeu								

□ Recommendations □ Belizean Birth Certificate □ Permanent Residence □ Social Security □ Transcript □ Application Fee

Please answer the following q	uestions as accurately as	s possible if you are a transfer student:
Have you been suspended from	school before? Please indi	cate reason/no. of days if applicable.
Name all high schools you have	attended and reasons for l	eaving.
1. 2.	1. 2.	
3.	3.	
Why are you leaving the high sol reasons.	hool you are currently atte	ending? Please indicate if for academic or behavioral
Please describe your current far know about.	nily home situation- paren	ts, siblings, or other members the school should
Harra any aganaisa haan inyalya	d in any way with ways fan	aily? (Ey Dont of Human Company Dolina)
have any agencies been involved	u ili any way with your ian	nily? (Ex. Dept. of Human Services, Police)
Why did you decide to apply to l	Bishop Martin High School	?
Is there any other information v	ou would like to share? Fe	el free to attach a sheet of paper if necessary.
20 41020 4119 04102 111011114010119	<u> </u>	0. 11.00 to detail a 51.000 0.1 paper 11.110005581.j.
		l. Bishop Martin High School is a Roman Catholic Diocesan blic. These are ESTIMATED costs for First Form 2023-24.
Activity Fee	\$600.00/year	Payable at beginning of school year
Summer School	\$100.00	Mandatory for all new entrants
Orientation Package	\$100.00	Includes PE T-Shirt, shorts, badge and tie (female)
These are the ESTIMATED costs		
Tuition	\$500.00/year	Paid by GOB unless child repeats
School Fees	\$600.00/year	These are to be paid at registration
Summer School	\$100.00	Mandatory for all new entrants
Orientation Package	\$100.00	Includes PE T-Shirt, shorts, badge and tie (female)
	Agreement of Paren	t(s) / Guardian(s)
I have read the information on t		epted at Bishop Martin High School, I shall:
		ed by Bishop Martin High School.
		school and cooperate with the school in enforcing them.
	-	chool functions and supporting school activities.
=	-	ly on home study/assignments/homework.
		, , , , ,
Name of Parent/Guardian (PRIN	IT):	
Signature of Parent/Guardian:		
Date:		

Application Status			
Accepted	☐ YES	□ NO	
Waiting List	☐ YES	□ NO	



BISHOP MARTIN HIGH SCHOOL

Recommendation Form

To be filled by Principal and Std. 6 teacher (any subject teacher) or for transfer students, any other teacher

NAME OF APPLICANT:					
NAME OF SCHOOL:					
NAME OF RECOMMENDER:					
I AM THIS APPLICANT'S: Principal	_ Std. V	I Teacher		Other	_ (
Dear Recommender:					
Thank you for helping us with our admission	nrocess Pl	ease comr	alete this f	orm and re	turn it d
BishopMartin High School in a SEALED E					
1 0		• -		•	
July 5, 2024 (Transfer students). (If severa					
ent together in one sealed package). This int		iii be usec	i in our se	ection pro	cess and
onfidential. We encourage you to be honest	•				
Academic Skills	Excellent	Very	Good	Fair	Poor
Listens to and follows directions		Good			
Pays attention and participates in class	+				
	+				
Demonstrates ability to work independently					
Perseveres in spite of difficulty					
Completes work in a timely manner					
a to the arm	T 12 12 . 1	<u></u>	C .	F •	
Communication Skills	Excellent	Very	Good	Fair	Poor
D	1	Good			
Expression- oral skills	1				
Expression- writing skills					
Problem solving skills					
magination and creativity					
Social Skills	Excellent	Very	Good	Fair	Poor
	Zaccacac	Good	3004		1001
Respect for peers	1				
Responsibility for actions					
Self-control					
Responsibility for belongings					
Cooperation with others and school					
Emotional maturity					
ride in appearance					
Parent/ Guardian Support	Excellent	Very	Good	Fair	Poor
Parent/ guardian meets financial obligations.		Good			
Parent/ guardian attends school / class meetings.	1				
Parent/ guardian supports and complies with school					
policies and procedures.					
<u> </u>	<u> </u>				l .
I recommend this applicant with enthusiasm		O NOT rec	ommend th	is applicant	t
	1: □ 14	.1 1/ [T E 11.1		
I recommend this applicant with Summer Sch	001 III 🗀 M2	un and/or i	∟ English		
lumber of Accumulated Demerits (For	transfer stude	ents)			
as the student been senctioned for any violation	e? If eo. plass	ea dascriba	•		
as the student occir salictioned for any violation	s: II so, pieds	se describe.	•		
Number of Accumulated Demerits (For Has the student been sanctioned for any violation			:		
f there are any other things you think we sho	uld know. pl	ease note 1	them overl	eaf.	
are any emer animo you anim we show	mio 11 9 pi	inst more	01011		
Vame in Print:		Signature			
WILL III I IIII.		Signature	·		



Name in Print: _____

BISHOP MARTIN HIGH SCHOOL

Recommendation Form

To be filled by Principal and Std. 6 teacher (any subject teacher) or for transfer students, any other teacher

NAME OF APPLICANT: NAME OF SCHOOL:						
NAME OF RECOMMENDER:	NAME OF APPLICANT:					
Dear Recommender: Dear Recommender: Thank you for helping us with our admission process. Please complete this form and return it di BishopMartin High School in a SEALED ENVELOPE by April 12, 2024 (Freshman student) July 5, 2024 (Transfer students). (If several recommendations come from the same school, the sent together in one sealed package). This information will be used in our selection process and confidential. We encourage you to be honest. Academic Skills	NAME OF SCHOOL:					
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Listens to and follows directions Pays attention and participates in class Demonstrates ability to work independently Perseveres in spite of difficulty Completes work in a timely manner Communication Skills Expression- oral skills Expression- writing skills Expression- writing skills Imagination and creativity Social Skills Excellent Froblem solving skills Imagination and creativity Social Skills Excellent Froblem solving skills Imagination and creativity Social Skills Excellent Froblem solving skills Excellent Froblem solving skills Imagination and creativity Social Skills Excellent Froblem solving skills Excellent Froblem solving skills Imagination and creativity Social Skills Excellent Froblem solving skills Excellent Froblem solving skills Froblem solving skills Excellent Froblem solving skills Froblem so	BishopMartin High School in a SEALED El July 5, 2024 (Transfer students). (If severa sent together in one sealed package). This inf	NVELOPE I recomment formation w	by April dations co	12, 2024 ome from	(Freshma) the same s	n student school, the
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Perseveres in spite of difficulty Completes work in a timely manner Communication Skills	, , ,					
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Problem solving skills Imagination and creativity Social Skills Excellent Very Good Fair Poor Respect for peers Responsibility for actions Self-control Responsibility for belongings Cooperation with others and school Emotional maturity Pride in appearance Parent/ Guardian Support Excellent Very Good Fair Poor Excellent Very Good Fair Poor I recommend this applicant with enthusiasm I DO NOT recommend this applicant I recommend this applicant with Summer School in Math and/or English Number of Accumulated Demerits (For transfer students)						
Social Skills						
Social Skills Excellent Good Respect for peers Responsibility for actions Self-control Responsibility for belongings Cooperation with others and school Emotional maturity Pride in appearance Parent/ Guardian Support Parent/ guardian meets financial obligations. Parent/ guardian attends school / class meetings. Parent/ guardian supports and complies with school policies and procedures. I recommend this applicant with enthusiasm I DO NOT recommend this applicant I recommend this applicant with Summer School in Math and/or English Number of Accumulated Demerits (For transfer students)						
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Parent/ Guardian Support Excellent Good Parent/ Guardian Support Parent/ guardian meets financial obligations. Parent/ guardian attends school / class meetings. Parent/ guardian supports and complies with school policies and procedures. □ I recommend this applicant with enthusiasm □ I DO NOT recommend this applicant □ I recommend this applicant with Summer School in □ Math and/or □ English Number of Accumulated Demerits (For transfer students)						
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Parent/ guardian attends school / class meetings. Parent/ guardian supports and complies with school policies and procedures. □ I recommend this applicant with enthusiasm □ I DO NOT recommend this applicant □ I recommend this applicant with Summer School in □ Math and/or □ English Number of Accumulated Demerits (For transfer students)		Excellent	-	Good	Fair	Poor
Parent/ guardian supports and complies with school policies and procedures. ☐ I recommend this applicant with enthusiasm ☐ I DO NOT recommend this applicant ☐ I recommend this applicant with Summer School in ☐ Math and/or ☐ English Number of Accumulated Demerits (For transfer students)					-	
☐ I recommend this applicant with enthusiasm ☐ I DO NOT recommend this applicant ☐ I recommend this applicant with Summer School in ☐ Math and/or ☐ English Number of Accumulated Demerits (For transfer students)	Parent/ guardian supports and complies with school					
	☐ I recommend this applicant with enthusiasm		_			t
Has the student been sanctioned for any violations? If so, please describe:	Number of Accumulated Demerits (For	transfer stude	ents)			
	Has the student been sanctioned for any violations	s? If so, pleas	se describe	:		
	Test.			41	1 <i>C</i>	
	If there are any other things you think we shou	ııd know, pl	ease note 1	them over	leaf.	
If there are any other things you think we should know, please note them overleaf.						

Signature: