INSTRUCTIONS TO PARENTS/GUARDIANS

- 1. **OPEN CHOICES:** Choose a maximum of **two** schools from among any of the 21 Public Secondary Schools.
- 2. **CHOICES FROM ZONE:** Choose a maximum of seven (7) schools from within your zone. **You may NOT choose a school again if it was already chosen from among the open choices.**
- 3. Schools should be chosen in DESCENDING ORDER OF PREFERENCE, that is, the name of the school you most wish your child/ward to attend should be chosen as your first choice, then the other schools in the order of preference.
- 4. Springer Memorial may be chosen for girls in all three zones.
- 5. St. Leonard's Boys' may be chosen for boys in all three zones.
- 6. Parents should consider carefully the accessibility of transportation to schools when making choices.
- 7. Parents/guardians should read the booklet carefully and consult with the child's principal before completing the form.
- 8. Complete the form in duplicate. Both copies should be submitted to the principal who will return one copy after all the checks have been completed.
- 9. Please return completed forms to the Principal not later than Friday, 17th January, 2020.

GOVERNMENT SECONDARY SCHOOLS LISTED ALPHABETICALLY

School	School Abbreviation	School	School Abbreviation
Alexandra	(AX)	Parkinson Memorial	(PA)
Alleyne	(AL)	Princess Margaret	(PM)
Christ Church Foundation	(CF)	Queen's College	(QC)
Coleridge & Parry	(CP)	Springer Memorial (Girls Only)	(SP)
Combermere	(CS)	St. George Scondary	(SG)
Deighton Griffith Secondary	(DG)	Frederick Smith Secondary	(FS)
The Ellerslie School	(EL)	St. Leonard's Boys' (Boys Only)	(LB)
Graydon Sealy Secondary	(GS)	Daryll Jordan Secondary	(DJ)
Grantley Adams Memorial	(GA)	Lester Vaughan School	(LV)
Harrison College	(HC)	The Lodge School	(LS)
		The St. Michael School	(SM)

MINISTRY OF EDUCATION, TECHNOLOGICAL AND VOCATIONAL TRAINING BARBADOS, W.I.

CHOICE OF SCHOOLS FORM

A To be completed by Principal of Primary School and returned to Sen	nior Education Officer, Examinations by Friday, 2	4th January, 2020.
School Code No.		Sequence No.
	4 (,0 =	
Before completing this form please read very carefully - (i) the instructions in the Booklet.	s on the other side of this form. (ii) the information for	or Parents/Guardians
	(Block Capital)	
Pupil's Name(Block Capitals Surname or Family Name)	Other Name(s)	
National Registration # of Child	of Birth: Sex: (Tick	k) Male (M) Female (F)
Country of Birth:		
Pupil's Address:		No.
Name of Parent/Guardian: Mr. Mrs. Miss(Surna	me) (Block Capitals)	(Christian Name)
National Registration # of Parent/Guardian		
I certify that the above information is correct.	Principal's S	signature
Following the instructions on the other side of this form, write the n		e <u>e.</u>
OPEN CHOICES	CHOICES FROM ZONES	
School School	School	School
1st Choice	3rd Choice	Abbrev.
2nd Choice	4th Choice	
	5th Choice	
	6th Choice	
	7th Choice	
No. of schools chosen	8th Choice	
	9th Choice	
Signature of Parent/Guardian: Tel. N	No Date	