



FAHS - FEILDING HIGH SCHOOL

Application For Student Hostel Accommodation

Student's Name _____ Date of Birth _____

Male / Female _____

Address _____

Year Admission Requested _____

Current School Year (circle one) 5 6 7 8 9 10 11 12

Parents / Guardians Names _____

Telephone (Private) _____ (Business) _____

Email Address _____

Present Primary School _____

Brothers / Sisters at FAHS – Feilding High School _____

Distance from Nearest Secondary School _____

Distance from Nearest Secondary School Bus _____

Details of any Previous Connection with the School _____

Any Special Reason for Making Application _____

Signature of Mother / Guardian _____

Signature of Father / Guardian _____

Date _____

