



MUFFLES COLLEGE

Making Christian Education Meaningful

P. O . Box 64, Orange Walk Town, Belize, C.A. | TEL: 322-2033 or 322-0302 | E-mail: principal@mufflescollege.com

ADMISSION REQUIREMENTS AND PROCEDURES

Muffles College welcomes your application as a Standard VI student or secondary school transferee and will make every effort to assist you. The admission procedure includes the following:

Application Procedures

- 1 Complete and submit to the Principal's Office your **Prospective Student Application & Recommendation** forms along with the **\$15.00 non-refundable Application Fee**. Please note that there is a **\$5.00 additional Late Fee** if the application form is not received on time.
- 2 Provide evidence of good conduct and satisfactory academic performance through letters of recommendations from the principal and Standard VI teacher of the appropriate primary school or English teacher of the appropriate secondary school (or primary school if applicable).
- 3 Submit **copies** of your **Standards IV, V, and VI report cards or cumulative grade record or transcript**. (All secondary school transferees must sit a Math & English Placement Exam.) Also submit a copy of your passport or birth certificate and a copy of your social security card.
- 4 Incomplete application forms **will not be considered**.
- 5 All prospective applicants must complete primary school.
- 6 Prospective students are accepted based on the number of spaces available in the freshman class, principal and teacher recommendations, and satisfactory academic performance in Core Subjects.

Registration Procedures

7. **Letters of Acceptance** from the Principal's Office are sent to all qualifying students.
8. Prospective applicants who did not receive a **Letter of Acceptance** are placed on the College's freshman class waiting list and may be accepted if a space becomes available.
9. All prospective students and one of their parents/guardians must attend the College's official registration for the freshman class and meet with the Principal and/or the other administrators. Failure to do so will result in the prospective student forfeiting his/her space in the Freshman class.
10. All applicants and one of their parents/guardians must sign and submit to the Principal's Office the **Medical Release Form** and the **Internet Use Agreement Sign Sheet**.
11. Yearly fee is \$675.00.
12. Payment of \$375.00 toward school fee must be paid on or before registration day.
13. A copy of the official school book list will be provided upon registration.
14. All freshmen are required to enroll in the **Summer School Programme**. A fee of \$25.00 per week should be paid on or before the first day of Summer School.
15. All freshmen are required to attend a pre-orientation day.
16. Work Scholarship Programme forms are available at the College's Office of the Vice Principal Academic Affairs for a limited number of low – income students who need financial aid.

Student Application Form

(Put a check mark where applicable)

1.	Date of Application	Day: _____	Month: _____	Year: 20 _____
2.	Name	Surname	First Name (Given)	Second Name
3.	Date of Birth	Day/Month/Year	Nationality:	
			Place of Birth:	
4.	Student's Social Security Number: _____			
5.	Religion (for statistical purposes)	Roman Catholic: <input type="checkbox"/>	Hindu: <input type="checkbox"/>	
		Evangelical: <input type="checkbox"/>	State Other: _____	
		Adventist: <input type="checkbox"/>		
6.	Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
7.	Address	Street #	City/Town/Village	District
8.	Telephone #	Home	# of Parent's Workplace (if applicable) _____	
			Mother: _____	Father: _____
9.	Primary/Secondary School Attended	Village/Town/City _____ District _____		
10.	Father	Surname	First Name (Given)	Occupation
11.	Mother * if married mother must provide maiden name	Surname	First Name (Given)	Maiden Name _____
			Occupation	
12.	Both Parents alive <input type="checkbox"/> Father Deceased <input type="checkbox"/> Mother Deceased <input type="checkbox"/>			
13.	Financially Responsible	Both Parents	Father Only	Mother Only
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Guardian
				<input type="checkbox"/>
14.	Parent / Guardian's Email Address: _____ @ _____			
<i>Fill in the following only if applicable.</i>				
15.	Guardian	Surname	First Name (Given)	Occupation
16.	Guardian's Address (If different from #7)	Street #	City/Town/Village	District
17.	Guardian's Telephone # (If different from #8)	Home	Work	
18.	I need financial assistance <input type="checkbox"/> Yes <input type="checkbox"/> No			
19.	I need to be helped with lunch/feeding program at school <input type="checkbox"/> Yes <input type="checkbox"/> No			
20.	I need extra help in Math <input type="checkbox"/> Yes <input type="checkbox"/> No I need extra help in English <input type="checkbox"/> Yes <input type="checkbox"/> No			

Applicant: Please complete this part of the application in your own handwriting.

Provide a short introductory statement about yourself.

In what school, parish or community related activities do you participate?

Do you have special interest/talent in art, music, dance, theatre, or sports? If yes, explain.

Why do you want to attend Muffles College?

I hereby apply for admission of my son/daughter to Muffles College, in accordance with the school's moral rules and regulations and policies. I/We will be responsible for all fees due to the school.

Signature of Parents or Guardian(s)

Date _____ 20__
Day/Month/Year

Address (if other than the Student's) _____

I hereby apply to Muffles College and, if accepted will uphold its philosophy and abide by its moral rules and regulations. **I also hereby state that if I had a history of disciplinary problems at any previous school which I attended that it has been disclosed in this application.**

I am prepared to sign (together with my parents/guardians) the contract of conduct as designated by the College. All the statements made by me above are **true and correct.**

Signature of Applicant (use an ink pen)

Date _____ 20__
Day/Month/Year

Secondary School Transferees – Please provide the following information:

Secondary School you were attending _____
Name of school Village/Town/District

Class and Form you were in _____ Overall Grade Point Average _____

Area of Study: Business _____ Secretarial _____ Science _____
 Vocational _____ Other _____

Reason for Leaving: _____

Have you ever been suspended/expelled from school? Yes _____ No _____

If yes, please specify the reason:

For Official Use Only by Muffles College		(Initialed by office personnel) _____	
Birth Certificate Presented: Yes: _____ No: _____			
Name on Birth Certificate if it is different than the name provided in # 2			
Name	<small>Surname</small>	<small>First Name</small>	<small>Second Name</small>
Primary School Report Card Presented (Standards 4 th to 6 th): Yes: _____ No: _____			
Conduct Reference Presented by: Principal: Yes _____ No _____ Teacher: Yes _____ No _____			
Signature of Person Processing the Application _____		Date _____ 20__ Day/Month/Year	

For Official Use Only	
Accepted: Yes _____ No _____	Student # _____
Academic Probation: Yes _____ No _____	
Waiting List: Yes _____ No _____	

Recommendation Form - Application for Entrance



Dear Recommender,

Please ensure that **a recent passport size photograph** is attached to this recommendation form to verify applicants' identity.

Each Application Form must be accompanied by **two recommendation Forms**, one is to be filled in by the applicant's **school principal** and the other by a **teacher** (or English teacher if applicable).

Name of Applicant	Surname	First Name	Second Name
School (present)			(Town/District)

Write the position and name (BLOCK LETTERS) of the person completing this form.

I am the child's: Principal ____ Teacher ____	Surname	First Name
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Rating (1 – highest, 5 – lowest)	1	2	3	4	5
Academic Promise					
Consistent on performance during class assessments					
Dedication to Studies					
Attitude towards authority					
Ability to get along with others					
Carrying out responsibilities					
Participation in school activities					
Attendance at school					
Conduct in class					

Please provide accurate and truthful information about the applicant's Disciplinary Record. (omission of this information may result in non-acceptance)

***You may use the back of this sheet or send an attachment if space is a concern.**

Signature

Date _____ 20____
day/month/year

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