MONDAY 28th AUGUST 2023.



Please scan and submit a copy of your **CXC** Results Preslip along with this Application Form via email to queensroyalcollege@qrc.edu

QUEENS ROYAL COLLEGE SIXTH FORM APPLICATION FORM

EXTERNAL CANDIDATE

PLEASE NOTE THAT INABILITY TO COMPLETE THIS FORM AS REQUIRED WILL BE

	CON	NSIDERED A LA						RM PROGRAM		<u> </u>		
	SUF	RNAME:		FIRST NAME:								
	DAT	E OF BIRTH:										
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	oco	OCCUPATIONAL ASPIRATIONS:				1)						
	(CAREER INTERESTS) 2)											
	3)											
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		UBJECTS REQUESTED AT THE ADVANCED LEVEL (see grc.edu website for subject choices)								¬		
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In which co-curricular activity/activities will you be involved at Queen's Royal College (e.g. library assistance, aquatics, cricket, choir, music, chess, cadets, debating, football, public speaking, table tennis, track ...)?

STUDENT'S Signature: PARENT'S Signature: DATE:



QUEEN'S ROYAL COLLEGE
P.O. Box 52, Port-of-Spain
Trinidad, Republic of Trinidad and Tobago
Telephone No.: 1-868-622-1671 E-mail ORC.sec@fac.edu.tt

Date:

The P	rincip	al,								
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Dear	Sir/Ma	adam,								
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A. V	What,	in the professional o	pinions of teach	ners, are	e his cha	ances of	doing	well at th	ne CAPE level	
in the subjects he is requesting? The numbers correspond to the CAPE subject requests overleaf. (Subject request: RECOMMENDED/NOT RECOMMENDED)										
(Subject request. RECOMMENDED/NOT RECOMMENDED)										
		SUBJECT	T SELECTED		RECOMMENDED (Y/N)					
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Please n	rovide	e the information rea	uested below b	v circlii	ng the a	nnronri:	ate lette	r		
-	Please provide the information requested below by B. His conduct and general attitude.				B	С	D	•		
	C. His attendance at school.			A	В	C	D			
D. I	His pu	nctuality.		A	В	C	D			
1	N.B.	A = Very good	B = Good	C = Needs Improveme				ent D = Poor		
						Affix			s school stamp here	
I	Princi	oal								