



St. Anthony's College
Morne Coco Road, Diego Martin
Tel: 637-6744; Email: admin@stanthonys.edu.tt
Website: stanthonys.edu.tt

Attach photos here

Form 1 Registration – 2024 Intake

Student Information

Name (Surname, First Name) _____

Date of Birth (mm/dd/yyyy) _____ Student's Age: _____

Birth Certificate Type: Trinidad and Tobago | Overseas

Birth Certificate PIN. _____ SEA Placement No. _____

Address (No Abbreviations): _____

Religion: _____ Nationality: _____

Email Address: _____

Primary School: _____

Primary School Phone No. _____

Class Assigned (St. Anthony's College): 1-1 | 1-2 | 1-3

Assigned House: _____ School Meals: Yes | No

Medical Conditions: _____

Mental Health Conditions: _____

Public Social Assistance (Gov't): Yes | No

Name of Siblings & Age: _____

Father's Information

Student Caretaker: Yes | No

Name (Surname, First Name) _____ ID: _____

Address (No Abbreviations): _____

Contact No. _____ WhatsApp No. _____

Profession: _____ Email Address: _____

Name of Employer: _____

Address of Employer: _____

Interest(s) in assisting the College: _____

Assign College Managed Email Account: Yes | No (*Form 2 Only*)

Internet Connection & Access Type: _____

Signature : _____

Mother’s Information

Student Caretaker: Yes | No

Name (Surname, First Name) _____ ID: _____

Address (No Abbreviations): _____

Contact No. _____ WhatsApp No. _____

Profession: _____ Email Address: _____

Name of Employer: _____

Address of Employer: _____

Interest(s) in assisting the College: _____

Assign College Managed Email Account: Yes | No (*Form 2 Only*)

Internet Connection & Access Type:_____

Signature : _____

Guardian or Caretaker (Non-Biological Parents) Information

Name (Surname, First Name) _____ ID: _____

Address (No Abbreviations): _____

Contact No. _____ WhatsApp No. _____

Profession: _____ Email Address: _____

Name of Employer: _____

Address of Employer: _____

Interest(s) in assisting the College: _____

Assign College Managed Email Account: Yes | No (*Form 2 Only*)

Internet Connection & Access Type:_____

Signature : _____

Other Student Information

In case of emergency contact: _____ Contact No: _____

Relationship of emergency contact to Student:_____

SEA Examination Concession : Yes | No

SEA Examination Concession Type:_____

Extra Curricular Interests: _____