



# GOVERNMENT OF THE VIRGIN ISLANDS

Ministry for Education, Culture  
Youth Affairs, Fisheries and Agriculture

## APPLICATION FOR ENTRY INTO VIRGIN ISLANDS' SCHOOLS BY NON VIRGIN ISLANDERS

**PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS APPLICATION.**

1. In accordance with the Education Act, 2004 Section 21, 1 (a), "Every child shall attend school from the first day of the school calendar following that in which he attains the lower age of the compulsory school age limit..."
2. **Certified copies or original documents** will be accepted, and returned immediately upon verification. This application must be accompanied by the following documents:
  - ☐ Valid Birth Certificate
  - ☐ Immunization Card
  - ☐ Letter from the community clinic certifying full immunization of child
  - ☐ Passport-size photograph of the child
  - ☐ Passport of child (if applicable)
  - ☐ Passport-size photograph of parent/guardian
  - ☐ Passport of parent/guardian
  - ☐ Official Student Transcript (School seal and stamp should be affixed)
  - ☐ Health Insurance

**Immigration requirements for children to reside:**

- a) Applicant must send a signed request to Chief Immigration Officer.
- b) If you are not the parent of the child/ren your application must be accompanied by a notarized letter from the parent(s) or other document that substantiates legal guardianship or custody of the child.
- c) Please provide proof of financial support where applicable:
  - ☐ Bank Statement
  - ☐ Job Letter
  - ☐ Most current pay slips (2 weeks/month)
  - ☐ Approved labour clearance (persons coming into the territory for the first time)
3. Please provide us with proof of your status i.e. your birth certificate, bio page of your passport, resident or belongs card, or your entry permit stamp and number (R-\_\_\_\_\_) in your passport. If you are the applicant, kindly walk with your passport on delivery.
4. Please include mailing address, contact numbers or email address so that we can reach you.
5. All documents issued in a foreign language **MUST** be translated and certified and the translation accompanied by the original document.

**School Admission hours: 9:00 am – 3:00 pm**

**Submission Deadline:**  
**Advent Term: 30<sup>th</sup> April**  
**Lent Term: 30<sup>th</sup> November**

**For official use only**  
**ADMISSION ID:** \_\_\_\_\_ of \_\_\_\_\_  
No. Year

6. An **Official Transcript** bearing the stamp and seal from the school last attended, should be sent directly from the Principal of the school to the Ministry of Education & Culture to the following address:

The Chief Education Officer  
Ministry of Education & Culture  
Government of the Virgin Islands  
P O Box 72  
Road Town, Tortola VG 1110  
Virgin Islands

Electronic Mail: [admissions@vischools.edu.vg](mailto:admissions@vischools.edu.vg)

In the case of a transcript not being available, the child's report for the last 2 terms will be accepted.

7. Applications will be received for processing during the first four months of the year **(January to April) for Public and Private Schools and again in November for Private Schools only.**
8. The parent(s)/guardian(s) of the child/children should be the person submitting the application. The guardian(s) submitting an application **MUST** provide legal documentation to prove guardianship/custody of the child/children.
9. Kindly bring your **passport** and **work permit card** which will be returned immediately after the information requested has been verified. **Persons employed by the Government should bring along their letter of appointment.**
10. Students will **ONLY** be admitted into school in **September at the beginning of the school year (Advent Term) or in January, the beginning of the Lent Term.** Exceptional cases will be at the discretion of the Chief Education Officer. **Please note that a space into the Public school system cannot be guaranteed.**
11. If your application is being made for a private school, the application **MUST** be accompanied by a letter from the school, stating there is space to accommodate the child. Please note that this is not an approval letter for entry into the school system but is required in order for the Ministry to process the application.
12. **THIS FORM MUST BE COMPLETED BY THE PARENT OR GUARDIAN.**

**N.B. A space into the public school system cannot be guaranteed.**

# PARENTS AND GUARDIANS

Secondary Language\_\_\_\_\_

**Father's Place of Birth:** \_\_\_\_\_

Mother's Place of Birth: \_\_\_\_\_

Father's Place of Birth: \_\_\_\_\_

Proof of Status: ☐ Birth Certificate ☐ Passport Photo Page

Proof of Status: ☐ Birth Certificate ☐ Passport Photo Page

Guardian's Place of Birth: \_\_\_\_\_

Proof of Status: ☐ Birth Certificate ☐ Passport Photo Page

*In case of an emergency the following contacts will be notified based on the order in which they are listed.*

**Medical Alerts:** ☐ Allergies \_\_\_\_\_ Blood Type: \_\_\_\_\_

Other Alerts: \_\_\_\_\_

*In case of an emergency the following contacts will be notified based on the order in which they are listed.*

Emergency Contact #1

Name: \_\_\_\_\_  
Last First Middle Initial

Relationship: ☐ Mother ☐ Father ☐ Guardian ☐ Other \_\_\_\_\_  
Contact Number \_\_\_\_\_ ☐ Home ☐ Work ☐ Cellular

Emergency Contact #2

Name: \_\_\_\_\_  
Last First Middle Initial

Relationship: ☐ Mother ☐ Father ☐ Guardian ☐ Other \_\_\_\_\_  
Contact Number \_\_\_\_\_ ☐ Home ☐ Work ☐ Cellular

Other Special Medical Considerations: \_\_\_\_\_  
\_\_\_\_\_

M  
E  
D  
I  
C  
A  
L  
  
A  
N  
D  
  
A  
L  
E  
R  
T  
S

Type: ☐ Private Bus ☐ Government Funded ☐ Parents ☐ Walk ☐ Other \_\_\_\_\_

Bus Driver's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Departure Time: \_\_\_\_\_ Arrival Time: \_\_\_\_\_

Special Instructions: \_\_\_\_\_  
\_\_\_\_\_

T  
R  
A  
N  
S  
P  
O  
R  
T  
A  
T  
I  
O  
N

Attended Primary School in the Territory: ☐ YES ☐ NO

Name of Institution student last attended: \_\_\_\_\_

Date of Enrollment: FROM: \_\_\_\_\_ TO: \_\_\_\_\_

Last grade attended: \_\_\_\_\_

First Choice of School: \_\_\_\_\_

Second Choice of School: \_\_\_\_\_

Other family members attending school:

Name of Student: \_\_\_\_\_

Name of School: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Name of School: \_\_\_\_\_

School and Extra-Curricular Activities: ☐ Honour Roll ☐ Debate Club ☐ Choir ☐ Cheerleading  
☐ Basketball ☐ Softball/Baseball ☐ Rugby ☐ Karate ☐ Music ☐ Girl's Brigade  
☐ Boy's scouts ☐ Basketball ☐ Track and Field ☐ Tennis ☐ Other \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

*Signature (Please type/print full name if  
unable to sign)*

*Date*

GRADE: ☐ Kindergarten ☐ Grade 1 ☐ Grade 2 ☐ Grade 3 ☐ Grade 4  
☐ Grade 5 ☐ Grade 6 ☐ Grade 7 ☐ Grade 8 ☐ Grade 9  
☐ Grade 10 ☐ Grade 11 ☐ Grade 12

ENTRY CODE: ☐ Original Entry ☐ Return from Last Year  
☐ Promoted ☐ Previous Drop Out  
☐ Transfer from Private School ☐ Transfer from out of Country  
☐ Transfer within District (Public School)

District of residence: \_\_\_\_\_

Student Number: \_\_\_\_\_

Officer: \_\_\_\_\_

Stamp, Signature and Date

\_\_\_\_\_  
*Department of Immigration's  
Stamp, Signature and Date*