



GC FOSTER COLLEGE OF PHYSICAL EDUCATION AND SPORT

BOARDING APPLICATION FORM

Complete carefully ALL sections applicable to you. Incomplete applications will NOT be processed.

ALL RETURNING Resident STUDENTS ARE REQUIRED MUST BE CLEARED BY ACCOUNTS FOR APPROVAL FOR BOARDING ACCOMMODATION.

NAME OF STUDENT: _____ ID# _____

PROGRAMME: _____ GROUP: _____

ADDRESS: _____

CONTACT NO: Home _____ Cel: _____

Email: _____

Please indicate the period for which you are requesting boarding

- Semester 1 (only) August – December Semester 1 & 2 August – May
 Semester 2 (only) January – May Summer June – July

FOR OFFICE USE ONLY

Boarding Recommended: **Yes** **No**

COMMENTS:

Approved by: _____

Vice Principal-Administration

Date