



**LIBERTY ACADEMY AT THE PRIORY  
ENROLLMENT APPLICATION FORM**

LIBERTY ACADEMY AT THE PRIORY  
32 HOPE ROAD  
KINGSTON 10  
JAMAICA

Tel. (876) 960-5059/630-0013  
Email: [libertyatpriory@gmail.com](mailto:libertyatpriory@gmail.com)

**STUDENT TRANSFER FORM**

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

Name of Student: \_\_\_\_\_ Present Grade/Year: \_\_\_\_\_

Period of attendance/ Years attending institution: \_\_\_\_\_

*The above student is seeking admission to enter Liberty Academy at the Priory. Please complete this form and return it together with the relevant records to us directly by email, or hand deliver in a sealed envelope to the person making the request. **This form must be stamped with the school's stamp or sealed with the school seal to be valid.***

Areas of Evaluation	Excellent	Very Good	Average	Poor	Unable to comment
Shows reverence to God					
Academic achievement					
Academic potential					
Appearance					
Classroom behaviour					
Conduct					
Effort with work					
Emotional maturity					
Extra-curricular activities					
Follows directions					
Initiative					
Integrity/ Honesty					
Leadership ability					
Punctuality					
Self-discipline					
Shows positive attitude					
Shows respect to teachers and peers					
Works effectively in a group					

- Is this student in good standing at your school? Yes  No
- Has any disciplinary action been taken against this student? Yes  No
- If your answer is yes, please explain. (Continue overleaf if necessary)

\_\_\_\_\_

\_\_\_\_\_

- If your school is private, has the family met its financial responsibilities? Yes  No
- Is the child receiving financial assistance from the MOEYI? Yes  No
- Are the parents involved in the school? Yes  No
- Are the parents involved in the education of the student? Yes  No

Date: \_\_\_\_\_ Principal's Signature & school seal/stamp \_\_\_\_\_

School's email address: \_\_\_\_\_ School's telephone \_\_\_\_\_