



Friends' School Lisburn
6 Magheralave Road Lisburn Co Antrim BT28 3BH
Tel: 028 9266 2156 Fax: 028 9267 2134

e-mail: office@friends.lisburn.ni.sch.uk
web site: www.friendsschoollisburn.org.uk

Grammar School Application Form

Child's full name: _____

Date and place of birth: _____

School currently attended: _____

AQE score, with date (if available): _____

Date of proposed admission to Friends': _____

Year into which you would like your child to be admitted to Friends' School:

Year 8 Year 9 Year 10 Year 11 Year 12 Year 13 Year 14

Parent's Name: _____

Address, including postcode: _____

Email address: _____

Contact telephone number: _____

Any previous association with Friends' : _____

Parent's Signature: _____

Date: _____

Completed forms should be returned to the Principal's Secretary

Application forms will be held on file for one year from the date on which they are submitted, and we will contact you in the event that we have potential availability in the Year Group into which you wish your child to be admitted. Please note that it is the responsibility of parents to ensure that all details are correct and to notify any change in this information to the General Office.