



Government of the Republic of Trinidad and Tobago
Ministry of Education

SECONDARY ENTRANCE ASSESSMENT (SEA) 2024

PARENT DECLARATION FORM

PLEASE COMPLETE THIS FORM TO INDICATE IF:

- 1. Your child will not be accepting the secondary school place assigned*
- 2. Your child will be accepting the place but at a later date*

Student Name: _____

SEA Candidate PIN: _____

Secondary School Assigned: _____

Declaration: (Complete where necessary)

1. I am definitely NOT accepting the place offered because

(Reason)

2. My child will not be able to attend school until _____ because
dd/mm/yyyy

_____.

Parent's Name /Signature: _____

Witness Name/ Signature: _____

Date: _____