



Application Form

To be filled out by the school	
Year group	Starting date:

To be filled in by the parents/guardian	
Student's details	
Surname:	Name:
Date of birth:	Place of birth:
Gender:	Nationality:
Passport/DNI/NIE number:	
Current school:	Number of siblings:
Siblings in this school:	Siblings in other schools:
Full address:	
If the student lives with only one parent or a guardian, please give details and provide any relevant custody documentation.	
Parents' details	
<u>Father - guardian:</u>	
Surname:	Name:
Passport/dni/nie	Nationality:
Full address (if different to student's)	
Mobile number:	Home/work number:
Email:	Occupation:
<u>Mother - guardian:</u>	
Surname:	Name:
Passport/dni/nie	Nationality:
Full address (if different to student's)	
Mobile number:	Home/work number:
Email:	Occupation:

Student's medical information
Social Security Number/Health care provider:
Nearest private health care clinic: Telephone number:



Conditions, allergies, diet, educational needs...etc (please give details):
Details of any medicine taken/needed to be administered during the school day:

I confirm that the information provided on this form is true and accurate statement.

Signature:	Date:
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I agree to allow my child to be taken off campus for physical education, recreation and minor excursions (parents will be notified regarding excursions). Children will always be accompanied by teachers and/or staff.

Signature:	Date:
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At times, photos will be taken of the children, and these may be used for publicity purposes (e.g. on school website). I agree to allow my child to be photographed for these purposes.

Signature:	Date:
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I confirm that i have provided the following additional documentation as required:

- copies of passports, child and parents
- copy of social security card
- copy of private health card
- copies of previous school reports
- proof of address