

## Admission Department Kindergarten

**1- Date of application:** \_\_\_\_/\_\_\_\_/20\_\_\_\_

### **Student's information**

**2- Student's Name:** .....

**3- Date of birth:** \_\_\_\_/\_\_\_\_/20\_\_\_\_

**Age of student by the beginning of October** \_\_\_\_Y/\_\_\_\_M/\_\_\_\_D

**4- Nationality :** .....

### **Parent's information**

**5- Father's Qualification:** .....

**6- Father's Job:** .....

**7- Mother's Qualification:** .....

**8- Mother's Job:** .....

**9- Marital status of parents :** .....

**10- Parent's Mobile No.:** .....

**11- Address:** .....

**12- E-mail:** .....

Has the student previously attended nursery?	Yes		No	
Do You need Transportation?	Yes		No	
Do You have a brother / Sister in the school?	Yes		No	
(IF Yes) Brother/sister's name	Stage/Class			

**13- Does the child suffer from any diseases or allergies that require special care?**

Mentioning the type of treatment: .....

**14-Is there any reason that prevents the student from participating in the full physical education program?**

If yes, please give details: .....

**Notes:**  
.....