

Cambridge Assessment

Cambridge International School

Reference Number:			
	APPLICATION FOR AD	<u> MISSION (2022- 2023)</u>	
Name wi	ith Initials and Full Name to be	filled in <u>BLOCK LETTER</u>	S
Name with Initials			-
Full Name			-
Preferred Name	Я	lale Female	
Date of Birth	/ / (Day) (Month) (Year)	Аде	
Place of Birth	(City)	/(Country)	_)
Birth Certificate Number			
Nationality		_	
Country of Citizenship		Language used at .	Home
Home Address			
Home Phone No.		2 <sup>nd</sup> Phone No	
Name of Current School			
School Address			
Reason for leaving			

Detail of siblings already attending the ANIS:

Admission No.	Name	Age	Grade

Previous Schools Information
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To

School	Phone	Number	

Grade & Date of Entry

From

Reason for Leaving

Final Grade \_\_\_\_\_

School E-mail \_\_\_\_\_

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Names of the Previous Schools

\*Please attach a copy of the student's past school academic records.

- Has your child ever been dismissed or suspended from a school? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please give further details:
- Does your child have any specific learning difficulties? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please give further details:
- Are there any other issues or concerns, such as psychological/physical/medical treatments or conditions that we should be aware of?
  - Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please give further details:
- Who will be financially responsible for the student?
  Father \_\_\_\_\_ Mother \_\_\_\_\_ Guardian \_\_\_\_\_ Other \_\_\_\_\_(Please specify/Relationship)
- Please ✓ the appropriate categories for the child's parents/guardian's status:
  Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Father deceased \_\_\_\_\_ Mother deceased \_\_\_\_\_
- How did you hear about us? (Please ✓ all that applies) Social Media \_\_\_\_\_ Internet \_\_\_\_\_ Leaflet \_\_\_\_ Banner \_\_\_\_\_
   Reference by a parent \_\_\_\_\_ Reference by a teacher \_\_\_\_\_ Other (Please Describe) \_\_\_\_\_\_

## <u>Personal Data</u>

## <u>Parents'/ Guardians'</u>

Father's Name	Mother's Name
Contact number	Contact number
National ID/ Passport Number	National ID/ Passport Number
Educational Background	Educational Background
E-mail	E- mail
Religion	Religion
Country of Citizenship	Country of Citizenship
Designation	Designation
Employer/Name of the Company	Employer/Name of the Company
Office Phone Number	Office Phone Number
Office Address	Office Address
Monthly Income	Monthly Income

## Emergency Contact Details

Name	
Contact Number	

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Issue No.01

## <u>**Rules and Regulations**</u>

By enrolling your child in All Nations International School, the parent/guardian agrees to the following terms and conditions:

- To make sure the child is adequately prepared for classes (required textbooks, SRB, stationery, etc.)
- To purchase uniforms so that the child is sent with proper attire.
- To cooperate with the school as far as discipline and homework are concerned.
- To send the child to school on time (before 7.40am) except due to illness. In case of absences due to illness for 7 calendar days or more a medical report will be required from the hospital/physician.
- To support the child in their moral/social/character development with weekend/holiday activities, as necessary.
- To accept the terms, policies, procedures, rules and regulations of the school.
- To work in an amiable and appropriate manner with teachers, staff and administration.
- To communicate any questions which may arise to the office, child's teacher or Principal, as needed.
- To communicate any concerns or questions with the school in the respectable manner by arranging meetings according to the school policies and school meeting hours.
- Office hours for parents of ANIS students:

Administration & Accounting Office -	Monday ~ Friday	: 8.00am – 3.30pm
	Saturday	: 9.00am — 11.30am
For purchasing uniforms -	Monday, Wednesday & Friday	: 12.30pm – 3.00pm
	Saturday	: 9.00am — 11.30am

(You are requested to make appointments through the SRB.)

I have read the above and agree to the terms and conditions set forth with All Nations International School.

Signature (Parent/Guardian)

Date

For Office Use (Academic Year 2	022 – 2023)	
Received date:	Interview date:	
Registration No:		
Date of Admission:	Selected Class -	
Receipt No:	School House -	