

PUPIL APPLICATION FORM

INFORMATION

Please use this form when applying to the school for admission for your child. You may apply from when your child turns three until no later than ten weeks before their fourth birthday. If your child is older than four, you may also use this form.

The date of application will be the date filled in by the school when you have returned the form, completed and signed. Once we have received the signed and completed form, it will take between six and a maximum of ten weeks for us to look into the possibility of admitting your child. The decision rests with the school's director. Should the decision be positive, we will send you a letter of admission together with the registration form. After you have returned the form, completed and signed, your child will be officially registered at the school and will be given a place as soon as they turn four. If your child is already older than four, the date of admission will be the one on the letter of admission.

Extra support

In order to estimate your child's needs as accurately as possible, we do need some information. For that reason, we ask whether you know or suspect that they need extra support. For example, is there anything that could restrict your child's ability to fully partake in the education? If so, please mention this in the form.

Privacy

We process personal data in the registration and education of your child. You will find more information about how we do that in our *Privacy Statement - registration for and participation in education*. You will find the statement on our website.

You only have to fill in the grey highlighted sections of the form if they are applicable.

PUBLIC APPLICATION FORM

Registration detail	
Date of application (to be filled in by school)	
Desired date of first school day	

Personal data	
Surname	
Prefix(es)	
First name	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Date of birth	

Additional information		
Any information relevant to being able to determine the support needs (this might include a disorder, a physical or intellectual disability)		
Has your child been registered at another primary school?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If so, which school or schools?
Do you endorse the school's principles (the educational concept, for example)?	<input type="checkbox"/>	Yes/no

Address	
Country	
Postal code	
House number	
House number suffix	
Street name	

Previous history up till four years (fill in if your child is not yet aged four)	
Indicator childcare or early childhood education (VVE)	<input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input type="checkbox"/> No
Childcare or early childhood education programme	
Duration of childcare or early childhood education	
Name of nursery/crèche	
Name of preschool	

Previous history at more than four years of age (fill in if your child is transferring from another primary school)	
Previous school	
Location of previous school	
Most recent academic year + class	

Contact information carers				
	Carer 1		Carer 2	
Surname				
Prefix(es)				
First name				
Title				
Relationship to pupil	<input type="checkbox"/>	Adoptive parent	<input type="checkbox"/>	Adoptive parent
	<input type="checkbox"/>	Co-parent	<input type="checkbox"/>	Co-parent
	<input type="checkbox"/>	Grandparent	<input type="checkbox"/>	Grandparent
	<input type="checkbox"/>	Mother	<input type="checkbox"/>	Mother
	<input type="checkbox"/>	Foster parent	<input type="checkbox"/>	Foster parent
	<input type="checkbox"/>	Stepmother	<input type="checkbox"/>	Stepmother
	<input type="checkbox"/>	Stepfather	<input type="checkbox"/>	Stepfather
	<input type="checkbox"/>	Father	<input type="checkbox"/>	Father
Legal authority	<input type="checkbox"/>	Yes <input type="checkbox"/> No	<input type="checkbox"/>	Yes <input type="checkbox"/> No
Telephone number				
Email address				

SIGNATURE CARERS

Carer 1	
Name	
Date	
Signature	

Carer 2	
Name	
Date	
Signature	