



Academic Year 20__/20__

| First Name: | | | | | | |
|--|--------------|---------------|--------------------------------------|--|--|--|
| Father's Name / Mi | ddle Name: | | | | | |
| Family Name: Passport Sp | pellina | | | | | |
| Gender: Male Female Date / Place Nationality: | | | (Day/Month/Year) (City/Country) | | | |
| Sibling(s) attending | SABIS® Netv | work School | Yes No School Name(s) | | | |
| • Transfer | Yes | ○No | SABIS® Network School | | | |
| New Admission | Yes | ○No | | | | |
| Has your child pre If yes, which schoo | | | ool within the SABIS® Network? Yes N | | | |
| Has your child previously attended a school If yes, which school | | | | | | |
| Previous School | | | Country | | | |
| Previous grade level | (last attend | led) accordir | ng to leaving certificate | | | |
| Previous class —— | | | | | | |
| ID Card # | | | | | | |
| Languages(s) spoke | n at home | ○ English | Azeri Other | | | |
| Has your child ever If yes, kindly provide | | oeen asked t | to repeat a school year? Yes No | | | |
| | | | | | | |

| learning difficulty (speech/language therapy) Yes No If yes, kindly specify | | purposes? | | |
|--|-----------------------------------|--------------|--|--|
| | | | | |
| Is your child toilet trained (for KG1 and KG2) | ? Yes No | | | |
| School Lunch Yes No Transp | ortation OYes ONo | | | |
| 3 rd Language (to be considered for Grade 5 d | only) French Russian | | | |
| Local History/Geography language (to be co | nsidered as of Grade 5) Azer | i Russian | | |
| Family Data | | | | |
| 1 st Guardian (to whom the school reports a | nd other correspondance should be | e addressed) | | |
| Full Name | | | | |
| Relationship to StudentNationality | | | | |
| Occupation / Job Title | | | | |
| Company Name | | | | |
| Business Address | P.O. Box | | | |
| E-mail | Phone | Ext: | | |
| Home Address (Area, Street, Blg N#, Floor) | | | | |
| E-mail | | | | |
| Phone | Mobile | | | |
| 2 nd Guardian (if other than Mother) | | | | |
| Full Name | First / Middle / Family | | | |
| Relationship to Student | • | | | |
| Occupation / Job Title | | | | |
| Company Name | | | | |
| Business Address | | F.J. | | |
| E-mail (A C) D N// 5/) | Phone | | | |
| Home Address (Area, Street, Blg N#, Floor) | | | | |
| E-mail | | | | |
| Phone | Mohile | | | |

| lo receive important school-r | • | • | ase choose one |
|---|-----------------------------------|----------------------------------|----------------|
| 1st Guardian 2nd Guar | rdian Mobile I | Number | |
| Status of Parents Married | | Other | |
| Who has custody of the child | (legal documents may be required) | Mother Fat | her |
| Siblings (if any) | | | |
| Name | Grade | | School |
| Siblings graduated/attended | a SABIS® Network Scho | pol Yes No |) |
| If yes: School | | \ | /ear |
| Is your child on regular medi If yes, please explain Kindly fill in the attached Med | |) | |
| Father or Mother a grad | luate from a SABIS® | Network School | |
| Is the applicant's father a gro If yes, what year? | | Network School? Which School? | Yes No |
| Is the applicant's mother a g | | | |
| Mother's Maiden Name | | | |
| How would you like to receiv Via Mail Via E-mail | • • • • | | |
| In case of emergency, who w | ould you like the schoo | ol to contact? | |
| Name 1 Phone # | | | |
| Name 2 | | Relationship | |
| Phone # | | | |
| I, the Guardian, confirm all the | | | |
| Name | Signatu | re | |

| For School U | se Only | | | | |
|---------------------------------|-----------------|------------------|--------------------|---|--|
| Date of applica | tion | | Apply | ing to grade | |
| Math | On Level | | | | |
| English | | <u> </u> | | | |
| | | | | | |
| Azeri | _ | Specials | | | |
| Placement Test | | <u> </u> | | | |
| Re-test Date | | | | | |
| _ | | | | | |
| | | | Date | | |
| With Summer So | _ | _ | | | |
| Full Special | Yes No | Specials | | | |
| Director's Signature | | | Date | | |
| APPLICANT'S R | EQUIRED DO | CUMENTS | | | |
| Completed m | edical form inc | cluding vaccinat | ion certificates | • | |
| Original scho | ol reports from | previous 2 yea | rs translated ir | nto English. | |
| • Student's birt | h certificate. | | | | |
| | | | | nce visa (If the Residence Visa is still ration entry stamp.) | |
| • Four recent p | assport-sized p | hotographs. | | | |
| Once all the abo | ve documents h | nave been hande | ed in, they will k | pecome the property of the school. | |
| Additional Ren | narks | | | | |
| | | | | | |
| | | | | | |
| | | | | | |