

Application

Please enclose a copy of the birth certificate

Beginner

School change in year \_\_\_\_ (year 20\_\_ / 20\_\_)

Details about your child:

.....  male /  female /  diversity  
Family name First Name

.....  
Date of birth Place of birth Citizenship

.....  
Address: Street, Number Town, Zip code

.....  
Languages spoken at home Religion, if you like to let us know

.....  
Health insurance, where child is enrolled Name of insurance holder

..... Child will stay in the afternoon care (Hort):  yes /  no  
Name of last kindergarden / school (registration needed)

My child will take part an  lesson of religion  lesson of humanism lesson (You must choose only one option)

Details about parents / education authorities

.....  
Mother work place / Phone number of place of work

.....  
Father work place / Phone number of place of work

.....  
Adress of mother / father (if different)

.....  
e-mail

Who is the legal guardian?  mother and father /  only mother /  only father

Emergency phone numbers / Please ensure to let us know any changes immediately

..... // .....  
Mother

..... // .....  
Father

..... // .....  
grand parents / relatives / neighbour, who might be contacted in any case of emergency

Special informations

Only for Beginners:

My child would like to join the same class as (2 friends).....

(Please note, we try hard but can't guarantee it will work)

Please notice, that my child has spezial needs (illness, treatment necessities, allergies...) If there is anything we should know to help your child best to enjoy school, please don't hesitate to come in direct contact, prior to school start.

My child owns a Berlin pass  B1  B2  L ..... (valid until)

Berlin, .....  
(Signature of parents / legal guardians)