



## **APPLICATION FOR ADMISSION**

*(Please type or print in capitals)*

### **STUDENT INFORMATION**

FAMILY NAME : \_\_\_\_\_

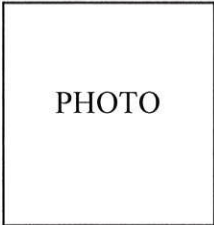
FIRST NAME : \_\_\_\_\_

DATE OF BIRTH : \_\_\_\_\_

SEX : M  F

MOTHER TONGUE : \_\_\_\_\_

NATIONALITY : \_\_\_\_\_



### **EDUCATIONAL HISTORY**

*(Please complete in reverse chronological order starting with the current school)*

Name of principal / head teacher of current school: \_\_\_\_\_

<b>Name/ Address of school</b>	<b>Classes</b>	<b>From / To</b>	<b>Programme followed</b>	<b>Exams taken</b>



**ACADEMIC INFORMATION**

Language(s) spoken at home: \_\_\_\_\_

Language of instruction in current school: \_\_\_\_\_

What would you consider as your child's first language? \_\_\_\_\_

*Please rate your child's language ability*

	Fluent	Good	Satisfactory
English			
French			
Other (-----)			

Has your child ever had difficulty with any of the following?

Language development : Yes / No

Communication : Yes / No

Physical development : Yes / No

Psychological development : Yes / No

Does your child have any learning disability? If yes, please give details.

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Has your child attended school regularly? If not, please explain the reasons briefly.

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Has he / she had extra tutorials? If yes, in what subjects?

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Has your child ever been asked to leave a school? If so, please give reasons.

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**INFORMATION ON FAMILY**

*(To better understand the student's situation, we need the following information which will be treated as confidential)*

*Please circle an option if appropriate:*

Parents divorced / Parents separated / A parent deceased / Child adopted

*Other children in the family*

Name			
Age			

Does your child suffer from any medical conditions? Please give details.

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**ACADEMIC INFORMATION (For A Levels Only)**

Subjects chosen for the A level programme

Year 1

Year 2

A Level \_\_\_\_\_ A Level \_\_\_\_\_

AS Level \_\_\_\_\_ AS Level \_\_\_\_\_

Where is the student likely to go to university?

What is he / she likely to study?

Special notes:

**PARENT INFORMATION**

**FATHER**

First Name : \_\_\_\_\_ Family Name : \_\_\_\_\_

Nationality : \_\_\_\_\_

Employer : \_\_\_\_\_



Current title : \_\_\_\_\_  
Email : \_\_\_\_\_  
Telephone (Work) : \_\_\_\_\_ Mobile: \_\_\_\_\_

**MOTHER**

First Name : \_\_\_\_\_ Family Name: \_\_\_\_\_  
Nationality : \_\_\_\_\_  
Employer : \_\_\_\_\_  
Current title : \_\_\_\_\_  
Email : \_\_\_\_\_  
Telephone (Work) : \_\_\_\_\_ Mobile: \_\_\_\_\_

**ADDRESS FOR CORRESPONDENCE**

*(Please keep us updated if there are any changes)*

First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_  
Street / House Number: \_\_\_\_\_ Post Code: \_\_\_\_\_  
City: \_\_\_\_\_ Country: \_\_\_\_\_  
Telephone : \_\_\_\_\_  
Email : \_\_\_\_\_

**I have read and understood the terms and conditions (attached) of the contract**

**DATE**

**SIGNATURE**

\_\_\_\_\_

\_\_\_\_\_

***This form must be sent to***  
BRITISH SCHOOL OF GENEVA  
95A, AV. CHATELAINE  
1219 CHATELAINE

***For further information contact***  
Tel: 022 795 7510  
Fax: 022 795 7511  
email: info@britishschoolgeneva.ch  
www.britishschoolgeneva.ch

*Please attach the following documents to the application form*

- 1) Medical certificate by the child's physician
- 2) Copy of the most recent school report
- 3) Proof of payment of application fee