



Application for Admission

Name:

Last

First

Middle

Birth date:

Date of Application:

Month

Day

Year

Month

Day

Year

Grade applying for:

Start Date:

Nationality:

Passport #, Date and Place Issued:

Will this student require bus transportation?

Yes

No

Family Information

Father

Mother

Last, First, Middle Name

Address

Email

Home Telephone

Mobile Phone

Employer

Business Address

Business Telephone

In whose name should tuition invoices be issued? (parent, organization)

In case of emergency, notify:

Relationship to student:

Phone:

Mobile:

Other children in the family:

Name	Date of Birth	Sex	School

Language(s) most commonly spoken at home:

Education History

List all school attended, beginning with the most recent.

Name of School	Location	Dates Attended/Grades

Please explain on a separate sheet of paper, if applicable:	Yes	No
Has your child ever skipped a grade? If yes, Which grade?		
Has your child ever repeated a grade? If yes, which grade?		

Has your child ever been identified as:

Attention Deficit Disordered/Hyperactive		
Speech and Language Disordered		
Having Behavioral problems		
Having difficulty with School Adjustment		
Developmentally Delayed		
Emotionally Handicapped		
Learning Disabled		
Slow Learner		

Has your child ever received any of the following services?	Yes	No
ESL		

Learning disability program		
Other remedial program		
Speech/language Therapy		
Counseling		
Gifted/Talented/Honors Program		
Limited Vision and/or Hearing Program		
Other		
Does your child require any medication prescribed by a physician to aid the learning process?		
Has our child ever been asked or been expelled from a school? If so, please explain:		
What extra-curricular activities (i.e sports, music, drama, clubs, etc.) has your child participated in?		
Please describe those strengths or weaknesses that child's teacher should know in order to assist him/her:		

I hereby apply for the admission of the above named student to Sharm el Sheikh College and agree that my child and I will abide by all the rules and regulations of the school. I authorize Sharm el Sheikh College to administer all testing deemed appropriate by school personnel to assess my child's academic skills, educational needs and progress during the term of my child's stay at the schools. I understand that any placement at the school is conditional on the student's ability to perform satisfactorily in the grade level and/or program assigned. I certify that the above information is complete, true and correct to the best of my knowledge.

Signature of Parent or Guardian _____
Date _____

Student's Signature (if applying for Primary 6 – Secondary 3) _____
Date _____