



dedicated to making a difference

Please attach recent photograph

# Application for Admission

**PERSONAL INFORMATION**

Application for grade	Anticipated length of enrolment at H.I.S.	
Student's family name	Student's first name	
Student's middle name	Student's preferred name	
Date of birth (D-M-Y)	Place of birth	Gender <input type="checkbox"/> male <input type="checkbox"/> female
German citizenship <input type="checkbox"/> Yes <input type="checkbox"/> No	Other/Additional citizenship	
Current home address		
Current home phone		
Anticipated first day of school (D-M-Y)	Previously applied to H.I.S.? <input type="checkbox"/> No <input type="checkbox"/> Yes - Date (D-M-Y)	

**LANGUAGE INFORMATION**

Student's main language					
Additional language	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Additional main lang.	
Additional language	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced		
Mother's/guardian's main language	Language usually spoken with student				
Father's/guardian's main language	Language usually spoken with student				
Language parents/guardians usually speak with each other					
If applicable, - language student usually speaks with sibling/s					- with care-giver (for example, au pair, grandparents)
Language in which the student prefers to read or be read to					

**PREVIOUS SCHOOLS OR KINDERGARTENS**

Present school/kindergarten	Enrolment Dates	Grades
Language of instruction	Email	
Address	Phone	
Previous school/kindergarten	Enrolment Dates	Grades
Language of instruction	Email	
Address	Phone	
Previous school/kindergarten	Enrolment Dates	Grades
Language of instruction	Email	
Address	Phone	

## Application for Admission

### ADDITIONAL PERSONAL INFORMATION

Has your child ever skipped a grade?  Yes  No

Has your child ever repeated a grade?  Yes  No

Has your child ever been in or referred to a support, special education or gifted programme?  Yes  No

Does your child, to your knowledge, have any form of learning difficulty?  Yes  No

Has your child ever been involved in disciplinary action at school?  Yes  No

Has speech or occupational therapy ever been recommended for your child?  Yes  No

Has your child ever participated in any psychological evaluation?  Yes  No

Does your child have any special physical/medical conditions?  Yes  No

Please give details if any of the questions above were answered with 'yes'. Use an extra sheet if more space is needed, and include copies of documentation.

Has your child's vision been tested?  No  Yes Date (D/M/Y)

Results of vision test (attach information if applicable)

Has your child's hearing been tested?  No  Yes Date (D/M/Y)

Results of hearing test (attach information if applicable)

*H.I.S. recommends having hearing and vision screening completed before a relocation.*

**For applications to Early Primary 1 or 2, or Grade 1** (Children must be able to use the toilet facilities independently during the school day.)

Child has been toilet trained since:

### APPLICATION INFORMATION

How did you first hear of H.I.S.?  H.I.S. family  other international school  internet  media  ECIS/AGIS  
 employer  embassy/consulate  friends  other source

What are your reasons for applying to H.I.S.?

Correspondence by email is preferred. Please indicate if this is not possible. Correspondence regarding this application should be sent to

Name  Email

Current Phone  Fax

## Application for Admission

### PARENT/GUARDIAN INFORMATION

Family name \_\_\_\_\_ First name \_\_\_\_\_ Relationship to student \_\_\_\_\_ Citizenship/s \_\_\_\_\_

Current address (if different from student's) \_\_\_\_\_ Email \_\_\_\_\_

Home phone \_\_\_\_\_ Mobile phone \_\_\_\_\_ Business phone \_\_\_\_\_

Occupation/Position \_\_\_\_\_ Employer's name and address \_\_\_\_\_

Family name \_\_\_\_\_ First name \_\_\_\_\_ Relationship to student \_\_\_\_\_ Citizenship/s \_\_\_\_\_

Current address (if different from student's) \_\_\_\_\_ Email \_\_\_\_\_

Home phone \_\_\_\_\_ Mobile phone \_\_\_\_\_ Business phone \_\_\_\_\_

Occupation/Position \_\_\_\_\_ Employer's name and address \_\_\_\_\_

Family name \_\_\_\_\_ First name \_\_\_\_\_ Relationship to student \_\_\_\_\_ Citizenship/s \_\_\_\_\_

Current address (if different from student's) \_\_\_\_\_ Email \_\_\_\_\_

Home phone \_\_\_\_\_ Mobile phone \_\_\_\_\_ Business phone \_\_\_\_\_

Occupation/Position \_\_\_\_\_ Employer's name and address \_\_\_\_\_

Family name \_\_\_\_\_ First name \_\_\_\_\_ Relationship to student \_\_\_\_\_ Citizenship/s \_\_\_\_\_

Current address (if different from student's) \_\_\_\_\_ Email \_\_\_\_\_

Home phone \_\_\_\_\_ Mobile phone \_\_\_\_\_ Business phone \_\_\_\_\_

Occupation/Position \_\_\_\_\_ Employer's name and address \_\_\_\_\_

### If parents are divorced or separated

Legal guardian of student  both parents  mother  father  guardian

Student lives with  both parents  mother  father  guardian

### SIBLING INFORMATION

Family name \_\_\_\_\_ First name \_\_\_\_\_ Age \_\_\_\_\_ Present grade \_\_\_\_\_

Presently attending H.I.S.?  Yes  No Presently applying to H.I.S.?  Yes  No

Family name \_\_\_\_\_ First name \_\_\_\_\_ Age \_\_\_\_\_ Present grade \_\_\_\_\_

Presently attending H.I.S.?  Yes  No Presently applying to H.I.S.?  Yes  No

Family name \_\_\_\_\_ First name \_\_\_\_\_ Age \_\_\_\_\_ Present grade \_\_\_\_\_

Presently attending H.I.S.?  Yes  No Presently applying to H.I.S.?  Yes  No

## Application for Admission

### INVOICE INFORMATION

Parents/Guardians are responsible for the payment of all school fees but may arrange to have payments made on their behalf. A completed Coverage Declaration Form, available on the school website or from the Admissions Office, must then be submitted with the Application for Admission.

School fees will be paid by  parents/guardians  employer  other

Send invoices to

Email address (all invoices are sent by email)

Company Name

Street

Postal code

City

Country

### ADMINISTRATION FEE

The non-refundable Administration Fee as per the relevant Statement of Fees will be paid by bank transfer to H.I.S. GmbH

Name of account holder:	H.I.S. GmbH
Bank:	Deutsche Bank AG Berlin
Bank address:	Unter den Linden 13-15 10117 Berlin Germany
Account number:	745 700 500
Sort code (BLZ):	100 700 00
IBAN:	DE94 1007 0000 0745 7005 00
SWIFT-BIC:	DEUTDEBBXXX

X Signature of (both) parents/guardians Date

### DECLARATION BY APPLICANT'S PARENT(S)/GUARDIAN(S)

- ✓ The information provided on this application is to the best of my/our knowledge complete and correct and is given freely.
- ✓ I/We hereby give permission to H.I.S. to contact my/our child's present/previous school/s if additional information is required.
- ✓ I/We am/are aware that data related to my/our child is stored electronically and will be used for school related purposes only.
- ✓ I/We understand that submission of the Application for Admission and payment of the Administration Fee does not constitute an offer of enrolment from H.I.S.

X Signature of (both) parents/guardians Date

### GENERAL TERMS AND CONDITIONS

- ✓ I/We understand that an offer of enrolment will be subject to the H.I.S. "Allgemeine Geschäftsbedingungen" (General Terms and Conditions) which I/we have read and understood (available for reference on the H.I.S. website [www.hischool.de](http://www.hischool.de)).

X Signature of (both) parents/guardians Date