## **ADMISSION FORM**

Child's Name:	Gender: Male/Female
Birth Date:	Birth Place:
Nationality:	Religion:
Child's Passport No.:	Emirates ID.:
Father's Name:	Profession:
Father's Email ID:	Mobile No.:
Father's Passport No.:	Emirates ID.:
Mother's Name:	Profession:
Mother's Email ID:	Mobile No.:
Mother's Passport No.:	Emirates ID.:
Residence Location:	
	Residence No.:
Does the Child have Siblings? Yes/No.	. If yes, which school does he/she attend?
Your choice of <u>any one school</u> for Kin	ndergarten 1 OR Year 1:-
Date:P	Parent's Signature:
For Office Use	Admission No.:
Admission Date:	Joining Date:
Class & Section Assigned:	Extended Care: Yes/No. If yes, timings:
Transport: Bus Area:	Own/Self:
	Signature: