

APPLICATION FORM DSL KINDERHAUS


Please attach current
passport size
photograph of your
child.

Application for entry as of the
following date or school year: _____

1. Personal details of child

Surname		First name(s)		Gender <input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> W. <input type="checkbox"/> O
Date of birth	Place of birth	Nationality (please state all nationalities)		Religious denomination
First language	German as foreign language <input type="checkbox"/> yes <input type="checkbox"/> no	Bilingual in		Other languages

2. Personal details of parents (legal guardians)

	Surname	First name	Date of birth	Marital status	Nationality	Native language
Parent 1						
Parent 2						
Current address Parent 1				Gender Parent 1 <input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> W. <input type="checkbox"/> O		
Current address Parent 2	<input type="checkbox"/> Address as P1			Gender Parent 2 <input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> W. <input type="checkbox"/> O		
Mobile Parent 1	Email Parent 1					
Mobile Parent 2	Email Parent 2					
<i>If different from parent1 / parent2</i>						
1. Legal Guardian						
2. Legal Guardian						
<input type="checkbox"/> German Embassy <input type="checkbox"/> German Army <input type="checkbox"/> Foreign Office <input type="checkbox"/> Other Embassy <input type="checkbox"/> DSL Staff						

3. Siblings at DSL

Surname	First name	Enrolled since	Current class
Surname	First name	Enrolled since	Current class

4. Previous attendance at kindergarten / nursery

Currently attending the following kindergarten/nursery	Name, place	Attending since
Entry into kindergarten/nursery	Name, place	Entry date

5. Details of Learning Requirements

Does your child have any educational needs/disability and/or medical condition? Yes No		
If yes, and they have received a formal assessment and or diagnosis please list below and attach copies of any reports or medical letters.		
Date:	Name of professional and type of report:	Diagnosis (if applicable)

6. Declaration:

By signing this registration form we understand, accept and agree the following:

- We confirm that all details stated above are complete and accurate.
- We agree that our personal data can be stored and used for the purpose of Processing this admission application.
- We will notify DSL Administration promptly of changes to our personal details (address, telephone number, email).

.....
Date

.....
Signature of parent or legal guardian 1

.....
Date

.....
Signature of parent or legal guardian 2

7. Attachments:

Please attach the following documents:

1. Proof of payment for registration and administration fee (£ 600 incl. VAT)
2. 1 passport size photograph (to be attached on page 1)
3. Birth certificate (copy)
4. Kindergarten / Pre-school report (copy)
5. Further documents (expert opinion, medical certificate, etc.)
6. Language Questionnaire

8. Please let us know how you heard about us:

- Internet
- Employer
- Friends or relatives
- Colleagues
- Other German schools abroad
- Relocation Companies
- Independent School Register
- Local Borough
- Other, please specify