

## APPLICATION FOR ENROLMENT SCHOOL YEAR 2010/2011 PRE-PRIMARY SCHOOL

*Please fill in this form carefully, since only complete applications can be considered.*

The undersigned \_\_\_\_\_ mother/father/guardian of the child  
herewith requests the European School Frankfurt (ESF) to enrol:

### **I. Information concerning the pupil**

Surname \_\_\_\_\_

First name(s) \_\_\_\_\_

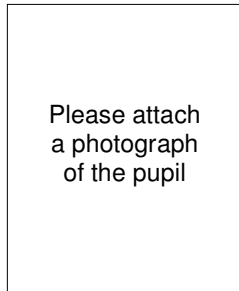
Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Country of Birth \_\_\_\_\_

Sex  female  male

Nationality 1 \_\_\_\_\_ Nationality 2 \_\_\_\_\_



Mother tongue / dominant language \_\_\_\_\_

Language spoken at home  
father: \_\_\_\_\_ mother: \_\_\_\_\_

### **1) Address of the pupil**

The child lives with the  parents  mother  father  guardian (as indicated above)

Street \_\_\_\_\_ No. \_\_\_\_\_

Postal Code/City \_\_\_\_\_ / \_\_\_\_\_ Country \_\_\_\_\_

Telephone \_\_\_\_\_ / \_\_\_\_\_ Mobile \_\_\_\_\_ / \_\_\_\_\_

E-mail \_\_\_\_\_ Fax \_\_\_\_\_ / \_\_\_\_\_

### **Admission to the pre-primary school:**

**Only children who are 4 years old or older before the end of 2010 can be considered for admission to the pre-primary for the school year 2010/2011 (General Rules/ Article 49).**

**2) Language Section requested:**  English  German  French  Italian

*The Language Section corresponds to the main language of instruction in the pre-primary and generally corresponds to the mother tongue/dominant language of the child.*

Present level of knowledge of the language of the section requested:

mother tongue  fluent  intermediate  beginner

### **3) Language I (Mother tongue / dominant language)**

Does the mother tongue/dominant language of the child correspond to the language of the section?

yes (if yes, proceed to question 4)  no

**If no, please indicate the mother tongue / dominant language of the child below:**

mother tongue / dominant language \_\_\_\_\_ (Language I)

Language I usually corresponds to one of the 4 language sections listed above and is taught throughout the school (pre-primary, primary and secondary)

Upon request, the school provides additional L1 tuition, in cases in which the mother tongue /dominant language of the child does not correspond to the language of the section.

The language 1 courses currently taught in addition to the languages of the 4 language sections are Spanish, Swedish, Greek, Finnish, Dutch, Portuguese, Polish, Czech, Slovakian, Slovenian, Hungarian, Irish, Bulgarian, Danish.

**Request for Language I tuition in mother tongue/dominant language**

Only applicable to children whose mother tongue/dominant language does not correspond to the language of the section.

yes

no

**4) Knowledge of languages** ( ++ = mother tongue / + = fluent / o = intermediate / - = beginner / -- = no knowledge)

Language	Number of years of practice (if applicable)	Level of knowledge ( ++ / + / o / - / -- )

**II. General information for admission**

**1) Previous day care / schooling:**

The child has already attended a pre-primary school  yes  no

The child has already attended a 'crèche' (day care nursery)  yes  no

Please provide details below:

School year	Name of institution	Type of institution	Country	Language of Instruction
2009/2010				
2008/2009				
2007/2008				

**2) Siblings, already attending the European School Frankfurt**  yes  no

If yes, please write here name/s and class/es:

\_\_\_\_\_

\_\_\_\_\_

**3) Are you making a new application for the school year 2010/2011 for another child?**  yes  no

If yes, please indicate the name/s and class/grade requested

\_\_\_\_\_

**4) Does your child suffer from a handicap, which requires specialised help?**  yes  no

If yes, please specify: \_\_\_\_\_

\_\_\_\_\_

Other remarks:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**III. Information concerning the parents**

	Mother	Father	Guardian
Surname			
First name(s)			
Nationality			
Street, No.			
Postal Code/City			
Country			
Address to which bills should be sent. Please cross if different.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone, private			
Mobile phone, private			
Fax, private			
E-mail, private			
Profession			
Employer			
Telephone at work			
Fax at work.			
E-mail at work			
Relationship to pupil <i>(Only if the child does not live with his/her parents)</i>			

**Please inform the school immediately of changes regarding the above data and personal circumstances (eg legal custody) or changes of employer (for Cat I and Cat II).**

#### **IV. Documents to be enclosed with this application**

1. A passport-size photo of the child.
2. A copy of the birth certificate of your child.
3. A copy of the school report, issued by the school last attended by the child, indicating results achieved in the school year 2008/2009 and if applicable, whether he/she has qualified for promotion to the next class.\*
4. If parents are divorced or separated, please enclose a document proving who has legal custody of the child.
5. If the child does not live with his/her parents, please enclose a document proving that the guardian of the child has custody.
6. A copy of the vaccination certificate.
7. For pupils joining P1, a medical certificate confirming that the child is ready to attend school.
8. The "Student Health Record" must be completed and returned with all applications (see annex).

\* After admission please supply the school with the last school report from the previous school giving information about promotion.

***Please only attach copies, no original documents.***

#### **V. School Charges and Fees**

1. The signatories of this agreement have read and understood the following legally binding conditions that apply to the European Schools and the legal guardians. With their signature the legal guardian(s) declare(s) their full compliance with the conditions listed. School fees are fixed annually by the Board of Governors of the European Schools (BGES) and may change from year to year.
2. Parents working for institutions listed below, are exonerated from paying school fees, however, they are required to pay other charges .
  - a) Employees of the European Central Bank
  - b) Employees of institutions of the European Commission

\* In addition to the school fee, a lump sum will be invoiced for photocopies, insurance and other costs. These additional fees are annually set and monitored by the Administration Board.

3. Parents who do not belong to the institutions listed above or whose employers have not signed a financial agreement with the BGES, are required to pay the following annual fee for the school year 2010/2011:  
Kindergarten: 2.649,76\*\* Euro - Primary school 3.643,47\*\* Euro - Secondary school 4.968,37\*\* Euro

**\*\*The amounts listed above are only an indication of the fees to be charged. The final actual cost will be fixed by the BGES and made public by April 2010 at the latest.**

4. In accordance with Article 29 of the General Rules of the European Schools, the annual school fees must be paid within the deadline fixed. It is not possible to legally challenge the decision of the Board of Governors of the European Schools with regards to school fees.
5. In accordance with article 6, paragraph 1 of the General Rules of the European Schools, the school has the legal right to pursue the payment of outstanding fees and other costs, through the courts.

6. Once the admission procedure is complete the signing parties are bound by the conditions listed there-in and consequently bound to the payment of school fees and other compulsory costs within the deadlines set by the school. Parents or guardians of children of category 3 are required by the school to make an advance payment of 25% of the school fees before the start of the school year. The remaining amount will be charged after the start of the school year.

**In accordance with the General Rules of the European Schools, in cases in which the necessary fees and/or compulsory costs (including the advanced payment of 25% of the school fees when requested) are not paid children will not be allowed to attend classes.**

## **VI. Notice of Departure**

The notice of departure must be facilitated in writing at least 2 weeks prior of leaving the school.

## **VII. Declaration**

The undersigned declares that he/she was informed that the request for enrolment can only be considered as accepted if the Headmaster of the European School Frankfurt has sent out a written confirmation of admission.

According to article 45 of the General Rules of the European Schools, enrolment shall not be considered definite until all the requested documents are enclosed to the pupil's personal file.

The undersigned declares that he/she has read the **General Rules of the European Schools** (see [www.eurisc.org](http://www.eurisc.org)) and undertakes to respect them by signing this request for application.

The undersigned declares that all information given in this document is true and that he/she will notify the European School Frankfurt of any changes, which may occur with regard to this information. In particular information concerning changes in personal circumstances, such as legal custody of a child, or a change of employer (of relevance to parents of Category 1 and Category 2) will be passed on to the school immediately.

With their signature the legal guardian(s) declare(s) their full compliance with the conditions listed in the application form.

Frankfurt Main is the responsible court of instance in case of legal proceedings for the payment of school fees and other costs.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature(s) of all the legal guardian(s)

(The application for enrolment can only be accepted if signed and completed correctly.)

**Student Health Record**

Family name	First name	Nationality
Date of birth:	Sex	Class
Name (mother)	Name (father)	
Address		
Phone number		
Business Phone mother		Mobile
Business Phone father		Mobile
Emergency contact (when parents not available)		Phone number
Name of pediatrician or family doctor		

**Personal Details:**

Glasses/contact lenses:                      No    Yes \_\_\_\_\_

Is your child under medical care:            No    Yes \_\_\_\_\_

Does she/he routinely take medicine        No    Yes \_\_\_\_\_

**Please circle below if your child has had any of the following:**

**Asthma, Convulsion/Epilepsy , Heart Problems, Allergies (Food, Medication) Congenital Abnormalities, , Ear Infections, Fainting, Frequent Headaches, Hearing Difficulties, , High/Low Pressure, Kidney/Urinary Infections, Menstrual Problems, Orthopedic Problems, Rheumatic Fever, Skin Problem**\_\_\_\_\_

**Please comment on any circled items or any other conditions:** \_\_\_\_\_

**Please circle below if your child has had any of the following:**

Whooping cough, Measles, Rubella, Mumps, Chicken pox, Scarlet fever, \_\_\_\_\_

Vaccination:

**Please provide a copy of the current Vaccination Certificate**

**Medical Permission**

I hereby give permission for my child to be given temporary medication by the school nurse, including Paracetamol, Aspirin is not used in the nurse's office.

Yes                       No

**Accident Treatment Permission**

I understand all efforts will be made to contact parents first and emergency contact second and if unavailable I hereby give permission for emergency measures to be initiated in case of accident or sudden illness.

I certify that all information given is correct and complete.

Date	Signature
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