



ENROLLMENT FORM 2020-2021

Date of entry: _____
First name: _____ Middle Name: _____
Last Name: _____ Second last name: _____
Place of Birth (country and city): _____
Student passport or id number (mandatory): _____
Birth Date: Day _____ Month _____ Year _____ Age: _____
Nationality: _____ Sex: M _____ F _____
Main language used by student and family: _____
Spanish Level: Beginner Conversational Fluid Native
English Level: Beginner Conversational Fluid Native
Religion to which student belongs: _____ practicing _____ non practicing _____
Present grade level: _____ Prior Institution: _____
Family group: Father _____ Mother _____ Brothers (#) _____ Sisters (#) _____
Parents Marital Status: Married Divorced Free Union Widowed Separated
The student lives with _____
Home Address where the student lives: _____

Practice some sports: YES _____ NO _____ (specify) _____
Play an instrument: YES _____ NO _____ (specify) _____
Hobbies: (specify) _____

Does your child present emotional or learning difficulties?

YES NO

If your answer is positive, please explain _____

Information about physical and health conditions, food restrictions, medications etc.

Other information that you consider relevant for the school and teacher to know:

Can Educarte take pictures/video of the student for facebook, the web page or any other social/promotional pages or newspapers? Yes _____ No _____ Comments:

Signature _____ Date _____

♥ **FATHER**



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First Name: _____ Middle Name: _____
First Last Name: _____ Second Last Name: _____
Passport or id n.: _____
Place and date of birth: _____
Nationality: _____
Religion: _____ Profession: _____
Name and place of work: _____
Present address: _____
Work telephone: _____ Home phone: _____
Cellular: _____ Whatsapp n. _____
E-mail: _____

♥ **MOTHER**

First Name: _____ Middle Name: _____
First Last Name: _____ Second Last Name: _____
Passport or id n.: _____
Place and date of birth: _____
Nationality: _____
Religion: _____ Profession: _____
Name and place of work: _____
Present address: _____
Work telephone: _____ Home phone: _____
Cellular: _____ Whatsapp n. _____
E-mail: _____

IN CASE OF EMERGENCY:

Family:

1. _____ **Phone** _____
2. _____ **Phone** _____

Friends:

3. _____ **Phone** _____
4. _____ **Phone** _____

SIGNATURE _____

DATE _____