



### ADMISSION FORM

Child's Name: \_\_\_\_\_ Gender: Male/Female

Birth Date: \_\_\_\_\_ Birth Place: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Religion: \_\_\_\_\_ Native Arabic Speaking: Yes/No

Child's Passport No.: \_\_\_\_\_ Emirates ID.: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Father's Email ID: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Father's Passport No.: \_\_\_\_\_ Emirates ID.: \_\_\_\_\_ Expiry: \_\_\_\_\_

Religion: \_\_\_\_\_ Nationality: \_\_\_\_\_

Level of Education: \_\_\_\_\_ Profession: \_\_\_\_\_

Employment Status: Employer/Employee/Self Employed

Mother's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mother's Email ID: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Mother's Passport No.: \_\_\_\_\_ Emirates ID.: \_\_\_\_\_ Expiry: \_\_\_\_\_

Religion: \_\_\_\_\_ Nationality: \_\_\_\_\_

Level of Education: \_\_\_\_\_ Profession: \_\_\_\_\_

Emirate: \_\_\_\_\_ Residence No.: \_\_\_\_\_ Family Size: \_\_\_\_\_

Does the Child have Siblings? Yes/No. If yes, which school does he/she attend?

Your choice of any one school for Kindergarten 2 OR Year 1:-

Date: \_\_\_\_\_ Parent's Signature: \_\_\_\_\_

**For Office Use:** KHDA Ref. No. \_\_\_\_\_ Admission No.: \_\_\_\_\_

Academic Year: \_\_\_\_\_ Joining Date: \_\_\_\_\_ Class & Section: \_\_\_\_\_

Extended Care: Yes/No Timings: \_\_\_\_\_ Transport: Bus/O.T. Area: \_\_\_\_\_

Signature: \_\_\_\_\_