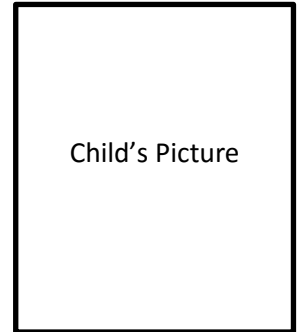




Create a Difference

DAYSTAR MONTESSORI AND FROEBEL SCHOOL ADMISSION FORM



CHILD'S INFORMATION

Name of Child _____ Family preferred name _____

Mailing Address _____

Home Telephone _____ email _____ Gender _____

Date of Birth _____ Country of Birth _____

Religion _____ Place of Worship _____

EDUCATIONAL BACKGROUND

Indicate all schools attended or is currently attending, especially the last school.

Name of School	Dates Attended
_____	_____
_____	_____
_____	_____
_____	_____

*Attach copies of last two schools reports

Which class is the child currently in? _____

Which class are you applying for? _____

Reasons for wanting the child to leave the present school.

FAMILY INFORMATION

Father/Guardian's Name _____ **Nationality** _____

Mailing Address _____

E-Mail Address _____

Mobile No: _____ Occupation _____

Religion _____ Place of Worship _____

Current place of employment: _____



Mother's Name _____ **Nationality** _____

Mailing Address _____

E-Mail Address _____

Mobile No: _____ Occupation _____

Religion _____ Place of Worship _____

Current place of employment: _____



SIGNIFICANT DATA (Please Tick)

* Child lives with: Both Parents Mother Father Guardian

If not with parent(s), please give details _____

Details of Person(s) Assigned to Collect Child From School

Please provide details of person(s) assigned to collect Child from School.

Kindly note that the individual will be required to provide identification before Child is released. Parents are mandated to inform the School if there is a change in the Child collection arrangement.

Allergies Information

Please indicate if Child has any allergies, please provide Doctor's report to confirm the allergies.

1. _____
2. _____
3. _____

* How did you first hear about DMFS; Adverts, Relatives , Friends or Other (please specify)

FOR OFFICE USE ONLY

Admitted: Yes No Class Admitted To: _____

Signed: _____ Date: _____

Principal/Administrator