



The International School  
of Choueifat - Abu Dhabi Khalifa City

## Application for Admission

Academic Year 20\_\_ / 20\_\_

First Name: \_\_\_\_\_ :الإسم:

Father's Name / Middle Name: \_\_\_\_\_ :إسم الأب:

Family Name: \_\_\_\_\_ :اللقب (إسم العائلة):  
Passport Spelling كما ورد في جواز السفر

Gender:  ذكر Male  أنثى Female :الجنس: Date / Place of Birth: \_\_\_\_\_ :تاريخ / مكان الولادة  
(Day/Month/Year) (City/Country)

Nationality: \_\_\_\_\_ :الجنسية: 2<sup>nd</sup> Nationality: \_\_\_\_\_ Religion: \_\_\_\_\_

Sibling(s) attending SABIS® School Yes  No  School Name(s) \_\_\_\_\_

• Transfer  Yes  No SABIS® School \_\_\_\_\_

• New Admission  Yes  No

Has your child previously applied to a school within the SABIS® School network?  Yes  No

If yes, which SABIS® school \_\_\_\_\_ Academic Year \_\_\_\_\_

Has your child previously attended a school within the SABIS® School network?

If yes, which SABIS® school \_\_\_\_\_ Academic Year \_\_\_\_\_

### For School Use Only

Date of Application \_\_\_\_\_ (Day/Month/Year) Application N° \_\_\_\_\_

Student Computer N° \_\_\_\_\_ Parent Number \_\_\_\_\_

School Transportation Services  Yes  No

Receipt Number - Application Fees \_\_\_\_\_ Date \_\_\_\_\_ (Day/Month/Year)

Receipt Number - School Fees \_\_\_\_\_ Date \_\_\_\_\_ (Day/Month/Year)

Applying for Level \_\_\_\_\_ 2<sup>nd</sup> Language \_\_\_\_\_

Info Completed by \_\_\_\_\_ Date \_\_\_\_\_

Accepted in Level \_\_\_\_\_

With Summer School  Yes  No

Full Special  Yes  No

Specials  Math  English  Arabic  French

Remarks \_\_\_\_\_

Director's Signature \_\_\_\_\_

Date \_\_\_\_\_

## Previous School Information

Previous School \_\_\_\_\_ Country \_\_\_\_\_

Previous grade level (last attended) according to leaving certificate \_\_\_\_\_

ID Card # \_\_\_\_\_

Languages(s) spoken at home  English  Arabic  Other \_\_\_\_\_

Has your child ever skipped or been asked to repeat a school year?  Yes  No

If yes, kindly provide details \_\_\_\_\_

Has your child been involved in any advanced, gifted / talented program, faced some sort of learning difficulty (speech/language therapy), or been tested for psychological purposes?

Yes  No If yes, kindly specify \_\_\_\_\_

## Family Data

**1<sup>st</sup> Guardian** (to whom the school reports and other correspondence should be addressed)

Full Name (Dr.,Mr.,Mrs,Ms) \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Nationality \_\_\_\_\_  
First / Middle / Family

Occupation / Job Title \_\_\_\_\_

Company Name \_\_\_\_\_

Business Address \_\_\_\_\_ P.O. Box \_\_\_\_\_

Business E-mail \_\_\_\_\_ Phone \_\_\_\_\_ Ext: \_\_\_\_\_

Home Address (District, Street, Bldg, Floor) \_\_\_\_\_

Personal E-mail \_\_\_\_\_

Residence Phone \_\_\_\_\_ Mobile \_\_\_\_\_

**2<sup>nd</sup> Guardian**

Full Name (Dr.,Mr.,Mrs,Ms) \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Nationality \_\_\_\_\_  
First / Middle / Family

Occupation / Job Title \_\_\_\_\_

Company Name \_\_\_\_\_

Business Address \_\_\_\_\_ P.O. Box \_\_\_\_\_

Business E-mail \_\_\_\_\_ Phone \_\_\_\_\_ Ext: \_\_\_\_\_

Home Address (District, Street, Bldg, Floor) \_\_\_\_\_

Personal E-mail \_\_\_\_\_

Residence Phone \_\_\_\_\_ Mobile \_\_\_\_\_

To receive important school-related SMS messages on your mobile, please choose one

1<sup>st</sup> Guardian  2<sup>nd</sup> Guardian Mobile Number \_\_\_\_\_

Status of Parents  Married  Seperated  Other

If seperated, who has custody of the child (legal documents may be required)  Mother  Father

**Siblings (if any)**

Name	Grade	School	Academic Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Siblings graduated/attended a SABIS® School  Yes  No

If yes: School \_\_\_\_\_ Year \_\_\_\_\_

Does your child suffer from any medical conditions?  Yes  No

Is your child on regular medication?  Yes  No

***Father or Mother SABIS® Graduate***

Is the applicant's father a SABIS® graduate?  Yes  No

If yes, what year? \_\_\_\_\_ Which SABIS® School? \_\_\_\_\_

Is the applicant's mother a SABIS® graduate?  Yes  No

If yes, what year? \_\_\_\_\_ Which SABIS® School? \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_

How would you like to receive your copy of the SABIS® Newsletter

Via Mail  Via E-mail Address \_\_\_\_\_

***Emergency Contacts Other than Parents***

In case of emergency, who would you like the school to contact?

Name 1 \_\_\_\_\_ Relationship \_\_\_\_\_

Phone # \_\_\_\_\_

Name 2 \_\_\_\_\_ Relationship \_\_\_\_\_

Phone # \_\_\_\_\_

I, the Guardian, confirm all the above details to be correct

Name \_\_\_\_\_ Signature \_\_\_\_\_

## APPLICANT'S REQUIRED DOCUMENTS

- Completed SABIS® Application Form
- Recent school report translated\* into English (Please first supply us with the original; a copy of the original will be kept by the school)
- Birth certificate attested\*\* and translated\* (Please first supply us with the original; a copy of the original will be kept by the school)
- Valid student passport and valid student residence visa (Please first supply us with the original; a copy of the original will be kept by the school)  
If the residence visa is still being processed, then the passport must show the immigration entry stamp
- Four passport photographs
- If applicable, a copy of the student's Emirates ID Card (Both sides)
- School transfer certificates attested\*\* and translated\* (The original will be kept by the school) to be submitted before the start of school
- End-of-year report translated\* (Please first supply us with the original; a copy of the original will be kept by the school) to be submitted before the start of school
- Vaccination certificate (Please first supply us with the original; a copy of the original will be kept by the school)
- Completed school medical form
- Complete the WebSchool waiver form
- Guardians should fill out the bus registration form in order to request transportation for their student.

### \*Translation

*Translated to English or Arabic where necessary by an official translator in the U.A.E.*

### \*\*Attestation

- **GCC countries** (U.A.E., Saudi Arabia, Qatar, Kuwait, Bahrain, and Oman) should be stamped by the relevant ministry in that country.

- **West European countries** (Germany, France, Spain, Portugal, Austria, Luxemburg, Denmark, the UK, Ireland, Belgium, Poland and Holland), **Scandinavian countries** (Finland, Sweden and Norway), **American countries** (U.S.A., Mexico and Canada) and **Australia** must be stamped by the authority that issued the certificate (the stamp of the school that issued the report card, the stamp of the hospital that issued the birth certificate, etc.)

- **Other countries** the certificate should be attested by the relevant ministry (e.g. Ministry of Education for school report), the Ministry of Foreign Affairs, and the embassy of the U.A.E. in that country. Alternatively, it could be stamped by the embassy of the issuing country in the U.A.E. and the Ministry of Foreign Affairs of the U.A.E.

## Additional Remarks

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