



Admission Application Form

Name of Student: Fa	Father's Name: Fan		Family Name:	
Student's Personal Details				
Date of Birth (Day/ Month/ Year):		Place of Birth:		
Religion:		1		
Gender:		Nationality:		
Home Address:	Street Nan	ne:	Building Number:	
Student resides with:				
Passport Number:				
Date of Issue:	Issued at:		Date of Expiry:	
Current Grade & System of the School:		Applying for Acade	mic Year:	
System Applied for: National		IG	IB	
Marital Status: Married Separated Divorced Widowed Status: Married Separated Divorced Father's Details				
Father's Full Name:	,	Title (Mr. /Dr / Other)	<u> </u>	
		Nationality:		
Religion:				
Home Address:				
Passport Number:				
Date of Issue:	Issued At:		Date of Expiry:	
Place of Work:		Business Address:		
Job Title:		Business Telephone Number:		
Business Fax Number:		Home Telephone Number:		
Mobile Number:		Email Address:		



Mother's Details				
Mother's Full Name:		Title (Mr. /Dr / Other):		
Place of Birth:	Place of Birth:		Nationality:	
Religion:				
Home Address:				
Passport Number:				
Date of Issue:	Issued At:		Date of Expiry:	
Place of Work:		Business Address:		
Job Title:		Business Telephone Number:		
Business Fax Number:		Home Telephone Number:		
Mobile Number:		Email Address:		

People to Contact in Case of an Emergency		
First Person		
Name:	Relationship to Student:	
Home Telephone:	Mobile Number:	
E-mail Address:		
Second Person		
Name:	Relationship to Student:	
Home Telephone:	Mobile Number:	
E-mail Address:		



Academic Information				
Previous Schools Names (Start with the most recent)	Years Spent in the School (from - to)	Language of Instruction in the School	Programme Studied in the School	Reason/s for Leaving the School

Student's Language Profile		
First language learned by Student	Number of years using the language	
Second language learned by student	Number of years using the language	
Language mostly used between family members at home		
Other language influences (e.g. language spoken by nanny, languages studied in school only or languages spoken in countries the child has lived in but not spoken at home)		



Siblings Details (Brothers and Sisters)			
Name of Sibling	Date of Birth	Current School	Grade level

Academic Information	Yes/ No	If Your Answer Is 'Yes', Provide Details
Has your child received any specific learning support such as EAL, ESL or Gifted and Talented?		
Does your child have Special Education Needs?		
Does your child have any physical or mental disabilities?		
Has your child ever skipped a year or been placed in a year below normal age?		
Has your child ever been asked to repeat a year or has been denied moving up a year? If yes, which one and when?		
Has your child been offered a place for the coming year at their present school?		
Does your child have any circumstances which may affect his/ her schooling?		
(For example: learning problems, dyslexia, disrupted schooling). Please include any applicable reports.		



Additional Information				
How did you hear about the C	ollege de la Salle?			
☐ Website				
☐ Parent	Name:			
☐ Former student	Name:			
☐ Other	(please specify)			
Identify any of your child's ta	lents or accomplishments:			
☐ Academics ☐ Athleti	ics			
	information about the person responsible for the payment of tuition and school			
expenses:				
Name:				
Home Number:				
Mobile Number:				
Address:				
I hereby apply for the admission of the aforementioned student to College de la Salle - Amman . All provided information is true and accurate. As the school has the right to be notified and updated with the latest information, I understand that any misleading, inaccurate or withheld information will result in the cancellation of the application or the withdrawal of my child from the school. I also agree to pay all school fees and deposits promptly (as requested). I further understand that all school fees are subject to change according to the college's discretion and that all school fees (tuition fees, registration fees, bus fees, testing fees, supplies and other expenses) are non-refundable once my child/ren is/are enrolled for the academic year.				
Name:				
Signature:				
Date:				
Relationship: Father ()	Mother () Guardian ()			