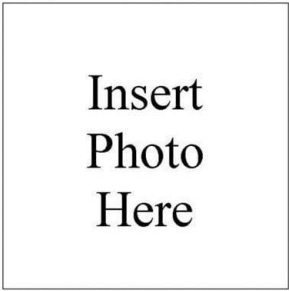




Maputo International School Student Enrolment Form



Documents to be provided by applicant:

- Student's most recent report/ academic transcript (2 years)
- Students identification
- Parent/Guardian identification
- 3 Passport size photos of student
- 2 Passport size photos of parent/guardian

Student Details

ENROLMENT FOR/ ADIMISSAO PARA: MONTH/MES _____ YEAR/ANO: 20_____ GRADE/CLASSE:_____

Full Name

First name/s:

Surname:

Date of Birth ____/____/____
(dd/mm/yyyy)

Address:

Gender _____ Native Language _____

Nationality _____

Religion _____

Passport/ID Number _____

Issue Date _____ Expiry Date _____

Siblings in Maputo International School; Name _____ Grade _____

Name _____ Grade _____

Academic Information

Current Grade/Recent Completed Grade _____

Previous School _____

Email Contact of Previous School _____

Educational disabilities _____

Medical Records

If your child is suffering from any clinical condition, or possessor of some kind of disability, please indicate:

- Allergies. Which _____
- Asthma /Special Treatment _____
- Hearing _____
- Vision _____
- Epilepsy _____
- Infectious diseases _____
- Diabetes _____
- Family History _____
- Others/ Academic learning disorders _____
- Academic learning disorder recommendations attached.

If the student has been on medical treatment, school services should be mandatorily informed. For safety reasons, medication may be stored at the school infirmary during the day

Parent Information

Name of the mother _____

Contact _____

Email _____

Spoken Languages _____

Occupation _____

Employer _____ Contacts _____

Name of the father _____

Contact _____

Email _____

Spoken Languages _____

Occupation _____

Employer _____ Contacts _____

Emergency contact

Name _____

Relationship _____

Contact _____

Health Insurance _____ / _____

If the student is ill or has an accident, the immediate contact should be

Parent/Guardian _____

Emergency Contact _____

Fees:

Please specify who will be responsible for fees:

Parents Employer

If an Employer is selected: Please give contact details:

Employer Name: _____ Contact Personnel name: _____

Email: _____ Tel: _____

Consent of Parent/ Guardian,

Please read the following information and sign your consent below:

i) School Trips:

I hereby acknowledge that Maputo International School carries out extracurricular academic activities which take place outside its facilities.

a) Day trips – these usually only take a few hours or, at most, a day of classes. These class trips do not usually incur any payment.

b) Tutor class trips – these usually take place for a day to 4 days away. These class trips will be reported individually and require a specific authorization and could incur a payment.

In all these activities, I understand that the students are accompanied by teachers and transported by the School or hired transport.

ii) Medical responsibility:

a) I acknowledge the school will assume responsibility for the student and the medical aid costs in the event the student is harmed on school grounds unless specified otherwise by myself as the students' parents/guardians. I understand the medical data will be processed internally as a confidential matter.

iii) Reserved rights:

a) I acknowledge in case of the omission of vital information that contributes to the normal learning of a student within the academic environment, the School reserves the right to cancel the respective registration and will not refund any fees or charges paid.

iv) Fees:

a) I acknowledge that all information provided by me, the Parent or Guardian is of our responsibility. I understand that a non-refundable registration fee is required to enrol my child in Maputo International School.

b) I hereby undertake to pay all school fees and charges in advance, at the beginning of each term and acknowledge that default interest will be on overdue accounts, legal collection fees, bank charges incurred by the School on collection, etc. will be recovered from me by the School.

v) Attendance:

a) I will also ensure my child's/children's regular and punctual attendance and understand that we are expected to abide by all School policies and cooperate with the Teachers and the Directors. (As per school Rules and regulations.)

DECLARATION

I, *(full name)*

_____ **Parent**
or Guardian of *(Students full name)*

student of the Maputo International School,

Grade _____, Year _____.

Have read and understood all information provided on this document.

I hereby agree and confirm all information issued above is true of my child, and hereby authorize my child to participate in all class day trips that take place outside the School.

Signature as identification _____

Date _____

Maputo International School

República de Moçambique

Ministério da Educação e Desenvolvimento Humano

Registration Process:

Family Number:

Student Number:

Student ID Issue date:

The enrolment will not be valid without the required approval signatures below

Director

Pedagogical Director

Finance

Key Stage Head

Check list:

Students identification

Parent/Guardian identification

2 Passport size photos of student

2 Passport size photos of guardians

Interview

Previous school feedback/Academic Transcript

Keystage Heads

Finance

