



## VERZOEK TOT INSCHRIJVING Voortgezet onderwijs / Secondary education

Dit formulier is een verzoek tot inschrijving bij DENISE. Door het verzenden van dit formulier kunnen er geen rechten tot plaatsing worden ontleend.

### Personal Information Student

Last name		Male/Female	
First names		First name	
Date of birth		Birthplace	
Nationalities		Country of birth	
Registration date NL		Identification nr. / BSN	
Previous countries + length of stay			

### Address

Address			
Postal Code		Place	
Phonenumber home		Phonenumber mobile	

### Personal Information Parent / Caregiver 1

Last name		Male/Female	
First name		Relation Student	
Date of birth		Birthplace and country	
Nationalities		Profession	
Marital status		Education	
E-mail address		Phone number (mobile)	
Address (if different student)			

### Personal Information Parent / Caregiver 2

Last name		Male/Female	
First name		Relation Student	
Date of birth		Birthplace and country	
Nationalities		Profession	
Marital status		Education	
E-mail address		Phone number (mobile)	
Address (if different student)			

### Family composition

Lives by		Brother and sisters	
----------	--	---------------------	--

### Medical information

Medical conditions	
--------------------	--

General practitioner			
Address			
Phonenumber			
Insurance company		Insurance number	

### Previous education student

Name previous school		Country and place	
Schooltype		Instruction language	
Period		Contact person	
Received support		Yes / No	
Has encountered social, academic or emotional problems		Yes / No	

### Language profile

Native language		Second language	
Dutch level		English level	
Parent 1 speaks		Parent 2 speaks	

### Motivation

Why do you choose DENISE?

How did you find us?

### Signature

I, the undersigned, declare to be the legal representative of the minor to be registered, authorized to submit this form and in truth have filled it in. The undersigned declares that if the student is accepted, he/she will participate all classes, excursions and school trips. The undersigned declares that the student will participate intake tests during his schooling and if the internal supervisor or care coordinator requires it to conduct psychological examinations in order to guide the students properly. The undersigned is aware that there is an anti-bullying protocol and will adhere to the school rules found on our website. The undersigned gives permission to the Esprit Education Foundation in Amsterdam to request information from third, to process personal information and to share relevant personal information and photos. This information will, among other things, be used for the Care Advisory Team, LWOO Decision, TLV Procedure, Previous and Future Schools, IB Group, LAS, DUO and possible others if necessary for the responsible education tasks.

Date		Place	
Parent 1 name		Signature	
Parent 2 name		Signature	