



# The North American International School

## Application for Enrollment

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### I. Student Information (one form per student)

1. **Name:**  
Last/Surname \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_
2. **Birth:** Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_  
Age on September 1, 2016 \_\_\_\_\_
3. **Sex:** Female \_\_\_\_\_ Male \_\_\_\_\_
4. **Citizenship:** \_\_\_\_\_ Passport Number \_\_\_\_\_
5. **Grade Applied for:** \_\_\_\_\_ **Last Grade completed:** \_\_\_\_\_
6. **Language:** Language(s) used at home \_\_\_\_\_  
Other languages spoken by child \_\_\_\_\_  
Language of instruction at previous school(s) \_\_\_\_\_
7. **Interests:** Please inform us if the child has special interests, hobbies, talents, and/or achievements.
8. **Possible hindrances:** Are there any medical, physical, psychological, or other conditions which could possibly hinder the student's satisfactory performance (academic or otherwise) in school?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please describe these.
9. **What do we need to know to assist:** Is there any condition(s) which the school administration and staff should be aware of to best assist the candidate to have a positive school experience or to prevent any harm or injury to the student?  
If so, please describe fully on a separate page.

**10. Brothers and sisters of candidate:**

| <u>Name</u> | <u>Age</u> | <u>Sex</u> | <u>Applying to NAIS?</u> |
|-------------|------------|------------|--------------------------|
| _____       | _____      | _____      | _____                    |
| _____       | _____      | _____      | _____                    |
| _____       | _____      | _____      | _____                    |

**11. Contact in South Africa other than parent/guardian.**

This person will be contacted in case of emergencies when the parent/guardian cannot be reached.

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

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell \_\_\_\_\_ Fax \_\_\_\_\_

**12. Doctor in South Africa who has records of the child or who has permission to advise in case of medical emergency:**

Name \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell \_\_\_\_\_ Fax \_\_\_\_\_

**13. Candidate's previous schooling**

List schools previously attended. (Include any structured curriculum preschool)  
Indicate with an X beside the school name which used American school curriculum.

| <u>School Name</u> | <u>City and Country</u> |
|--------------------|-------------------------|
| _____              | _____                   |
| _____              | _____                   |
| _____              | _____                   |

**II. Parent, family and emergency information.**

**Mother**

**Father**

Name \_\_\_\_\_

Name \_\_\_\_\_

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

Postal Address \_\_\_\_\_

Postal Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Physical Address \_\_\_\_\_

Physical Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: Home \_\_\_\_\_

Telephone: Home \_\_\_\_\_

Work \_\_\_\_\_

Work \_\_\_\_\_

Cell \_\_\_\_\_

Cell \_\_\_\_\_

Fax \_\_\_\_\_

Fax \_\_\_\_\_

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

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

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(To be filled in only if not now resident in South Africa)

If not in South Africa, when will you arrive?

If not in South Africa, when will you arrive?

Correspondence address until arrival in South Africa:

Correspondence address until arrival in South Africa:

Telephone (including country and area codes):

Telephone (including country and area codes):

Fax number:

Fax number:

### III. Enrollment application agreement

I hereby apply for admission for the above mentioned child in the North American International School.

I agree that the child will abide by all the school rules.

Unless and until I give written notice to the contrary, I authorize the above student to participate in all school activities, including athletics and school sponsored or sanctioned trips. I further authorize use of the student's photograph in school publications.

I agree that the child may be given vision and speech screening for schooling purposes.

I agree to pay all required fees and to abide by all payment stipulations and terms as set out in the document entitled **Fees and Payment Information**, a copy of which I have received.

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Full names and surname

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Signature of parent or guardian

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Date

