

School registration form academic year 2019/2020

REGISTER FOR

- Year 1
 Year 2
 Year 3 or higher

STUDIES

- VWO (University Preparatory Education)
 HAVO (Senior General Secondary Education)
 MAVO (Preparatory Secondary Vocational Education)
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STUDENT

NAME: GENDER: MALE / FEMALE.....

FAMILY NAME:

CHRISTIAN NAME(S):

BSN-NUMMER:

DATE OF BIRTH: PLACE OF BIRTH:.....

ADDRESS:

.....

.....

TEL. NUMBER HOME: CELLPHONE NUMBER:

NATIONALITY (AS STATED ON PASSPORT OR ID):.....

RESIDENT IN THE NETHERLANDS
SINCE: NAME OF GP::

LANGUAGE(S) SPOKEN AT HOME:

KNOWLEDGE OF ANY OTHER LANGUAGES:

SCHOOL HISTORY

SCHOOL 1

NAME SCHOOL:

KIND OF EDUCATION:

ATTENDED SCHOOL FROM:(START) TILL(END)

SCHOOL 2 (IF APPLICABLE)

NAME SCHOOL:

KIND OF EDUCATION:

ATTENDED SCHOOL FROM:(START) TILL(END)

SCHOOL 3 (IF APPLICABLE)

NAME SCHOOL:

KIND OF EDUCATION:

ATTENDED SCHOOL FROM:(START) TILL(END)

CONTACT DETAILS PREVIOUS SCHOOL

NAME SCHOOL:

ADDRESS:

NAME CONTACT PERSON SCHOOL:

EMAIL ADDRESS CONTACT PERSON SCHOOL:

SPECIFIC EDUCATIONAL NEEDS?

PLEASE PROVIDE US WITH ANY FURTHER DETAILS THAT MAY ASSIST US IN SUPPORTING YOUR CHILD IN OUR SCHOOL

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ADDITIONAL INFORMATION

REMARKS ABOUT HEALTH RELATED ISSUES, USE OF MEDICATION, FAMILY CIRCUMSTANCES, ETC.

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CONTACT DETAILS PARENT 1 - MOTHER (THIS HAS TO BE THE STUDENT'S LEGAL GUARDIAN)

NAME AND INITIALS:

ADDRESS:

.....
.....

TELEPHONE: WORK:..... CELL PHONE:.....

DATE OF BIRTH: COUNTRY OF BIRTH:

EMAIL ADDRESS :

PROFESSION :

NATIONALITY:

RESIDENT IN THE NETHERLANDS SINCE:

LANGUAGE SPOKEN AT HOME:

KNOWLEDGE OF ANY OTHER LANGUAGES:

CONTACT DETAILS PARENT 2 - FATHER (THIS HAS TO BE THE STUDENT'S LEGAL GUARDIAN)

NAME AND INITIALS:

ADDRESS:

.....

.....

TELEPHONE: WORK:.....CELL PHONE:.....

DATE OF BIRTH: COUNTRY OF BIRTH:

.....

EMAIL ADDRESS :

PROFESSION :

NATIONALITY:

RESIDENT IN THE NETHERLANDS SINCE:

LANGUAGE SPOKEN AT HOME:

KNOWLEDGE OF ANY OTHER LANGUAGES:

I HAVE READ AND AM AWARE OF THE SCHOOL RULES AND REGULATIONS OF HAARLEMMERMEER LYCEUM. (SEE WEBSITE SCHOOL).

I GRANT HAARLEMMERMEER PERMISSION TO SEEK CONTACT WITH MY SON/DAUGHTER'S PREVIOUS SCHOOL WITH THE PURPOSE TO EXCHANGE RELEVANT INFORMATION CONCERNING MY SON/DAUGHTER'S EDUCATIONAL BACKGROUND.

STUDENTS CAN ONLY BE REGISTERED WITH A COPY OF THE PASSPORT OR IDENTITY CARD, MOST RECENT REPORT CARD OF PREVIOUS SCHOOL AND A COPY OF THE BSN NUMBER ISSUED BY THE LOCAL COUNCIL.

DATE: PLACE: SIGNATURE:
LEGAL GUARDIAN 1

.....

DATE: PLACE: SIGNATURE 2:
LEGAL GUARDIAN 2

.....



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