

<p align="center">SPORTS ACADEMY SCHOOL</p> <p>Grade:</p>		<p align="center">Photo</p>
--	--	------------------------------------

Student Application Form

Student

Name: _____ First name: _____ Nationality _____ Sex: M F

Date of birth: ___ / ___ / _____ Place of birth: _____

Number of children in the family: _____

Mobile number: _____

Address: Building: _____ Street: _____ City: _____

e-mail address (mandatory): _____

Custodial Parents

Yes

No

Mother Maiden name: _____

Custodial authority: _____

Marital name: _____ First name: _____

Address: _____ (If different from the student's)

Profession: _____ House number: _____ Mobile number: _____

Work number: Work address: _____ Email address (Mandatory): _____

Father

Last name: _____ First name: _____

Address: _____ (If different from the student's)

Profession: _____

House number: Mobile number:

Work number: Work address: _____ Email address (Mandatory):

Additional Information

Deceased father Deceased mother Divorced parents Separated parents Remarried parent The student lives with:

Both parents Father Mother Other (precise): _____ Frequented school: _____

Phone number: _____

Was the student suspended from any school? Yes No

If yes, state the reason: _____

Does the student suffer from scholarly difficulties (dyslexia, linguistic difficulties, ...)? Yes No If yes, specify:

Does the student struggle with behavioral problems (hyperactivity, social anxiety, psychopathology...)? Yes No

If yes, specify: _____

Kindly provide us with a copy of the official report that diagnoses the medical difficulty(ies) stated above (if any).

Legal Guardian:

Last name: _____ First name: _____

Address: _____ (If different from the student's)

Profession: _____

House number: _____ Mobil number: _____ Work number:

_____ Work address: _____

Email address: _____

Are there any specific circumstances (Academic, social, familial or other) of which the administration should be notified? If yes, kindly specify:

Emergency Contact

Full name: _____

Relation to student:

Address:

___ House number: Mobile number:

Work number:

Transportation

Private Scholarly Pedestrian

Miscellaneous

Activities: List all the student's extracurricular, social and leisure activities:
(e.g. Sports clubs, scouts, volunteering, music, etc.)

_____ Is the student a high-level athlete: Yes No

If yes, in which sport: _____

How did you learn about Sports Academy School?

Why did you choose Sports Academy

School? _____

Parental Authorization Regarding Copyrights

(For minors only – adult students can employ their own signature)

As part of the scholar activities, the extracurricular activities, field-trips, travels, events and others the media content containing images of the student are liable to be selected and used for pedagogic reasons and to promote Sports Academy School. In accordance with the law, the free access to the data concerning your student is granted. You can check at any time the usage of such data and practice your right to request the removal of the content if you deem necessary.

- I authorize the use and broadcast of those images by Sports Academy School**
- I do not authorize the use and broadcast of those images by Sports Academy School**

An interview and a sports test will take place in September for the new students.

By this we, the undersigned, certify that the information presented above is true to the best of our knowledge and we commit ourselves to notify the administration of any significant variation of the information if and when it happens. We are equally committed to respect the internal and financial rules and regulations of the Sports Academy School

Date:/...../ 202..... Parents' signatures:

Mandatory required documents and elements to be attached with the application form, For the students of: BP1, BT1, BT2, BT3:

- 6 passport photos certified by a notary
- Individual Civil Registration Extract (original)
- Familial Civil Registration Extract (original copy)
- Blood type certificate
- Medical certification allowing clearly all sports practice
- A specialist's medical report in case of learning difficulties and/or disabilities
- Scholarly report of last academic year
- Certified copy of the Brevet
- Original certified Scholarly statement from last school

Registration Fees: 450.000 L.L. / Year