

<p align="center"><b>SPORTS ACADEMY SCHOOL</b></p> <p align="center">Grade: .....</p>		<p align="center"><b>Photo</b></p>
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## 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**

**Mother** Maiden name: \_\_\_\_\_ Yes   
 \_\_\_\_\_ No   
 \_\_\_\_\_ 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? \_\_\_\_\_

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### **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