

Please attach a photogi^Rage 1 sur 6

APPLICATION FOR ADMISSIONS

School Year: 20..... / 20.....

| For entry into (state which class/year group) | | | |
|---|-------|-------|---------|
| Please state your child's current class/year group | | | |
| 1. PERSONAL INFORMATION Students' Details | | | |
| NameFamily Name | First | | Middle |
| Preferred Name | | Girl | Воу |
| Current address | | | |
| | | | |
| | | | |
| Address in Cameroon (if different to above) | | | |
| | | | |
| | | | |
| Home telephone number | | | ******* |
| Date of birth Current age | | | |
| Country of birth | YY | MM | |
| Birth certificate N°(Please attach copy of Birth certificate) | | | |
| Cameroon citizen Yes No | | | |
| If no, please state your child's nationality | | ***** | *** |
| If your child has dual nationality, please state which | - 1 | | |





| What is your child's first language? | |
|--------------------------------------|------------------|
| What languages are spoken at home? . | |
| Father's Details | |
| Name | |
| Current address | |
| | |
| | |
| Home number | Mobile |
| Passport/ID number | Country of issue |
| Occupation | |
| Company name | |
| Email address | |
| Mother's Details | |
| Name | |
| Current address | |
| | |
| | |
| Home number | Mobile |
| Passport/ID number | Country of issue |
| Occupation | |
| Company name | |
| Email address | |



| Will both parents be residing in Cameroon w | hile your child is at sch | ool here | |
|---|---------------------------|----------|--|
| Please note that at least one parent mus International School | t be resident in Cam | eroon f | or the duration of the child's studies in The Bridge |
| Please state who your child will liv | ve with during ter | m time | ? |
| Trease state will your crima will in | e with during ten | | • |
| *************************************** | | | |
| Please complete the table below | for information ab | oout yo | our child's siblings, if applicable. |
| Name of sibling | Date of Birth | Sex | Name and address of present school |
| | | | |
| | | | |
| | | | |
| | | | |
| Caregiver's Contact Numbers (I Persons authorized to collect annex) | - | docun | nents in the absence of parents (Refer |
| Mailing Address | | | |
| For correspondence (please tick): Business address | | | |
| | | | |
| | | | |
| For invoices (please tick): | | | |
| Home | Father's Busin | ness | Mother's Business |





2. ACADEMIC INFORMATION

| Name and address of last three schools | From (MM/YYYY) | To (MM/YYYY) |
|--|---|---|
| | | |
| | | |
| lease provide copies of your child's la | ast school reports | |
| your child proficient in written and spo | oken English | |
| as your child ever been suspended or a | sked to leave school? If so, ple | ease specify. |
| | | |
| Ooes your child have any physical disa | _ | |
| Please include information on depression | in, unividely of stress related issu | |
| Please include information on depressio | | |
| Has your child ever received any form of by an educational psychologist or any oblease specify and provide a copy of the | learning support and/ or has yother specialists concerned wit | our child ever been ass h child development? (|



To: The Headteacher,

The Bridge International School

Bonamoussadi. B.P. 4157.

Dear Sir,

I understand and accept the policy and conditions governing enrolment and admission of my child into the School and I acknowledge that withholding relevant information relating to my child's physical, medical or educational needs may affect my child being offered or maintaining a place within the School.

I declare that to the best of my knowledge all of the information which I have supplied in this application form is full and accurate. I undertake to inform the School immediately of any change in the particulars to this application or of my wish to withdraw it.

I further declare:

That I have read and understood The Bridge International School's Rules and Regulations. I accept its content and will abide by it during our stay at the school.

I further undertake:

- 1. To pay school fees in line with recommendation of the school
- 2. To pay such increased fees as may be approved by the Board of Governors from time to time;
- 3. To inform the school of my wish to withdraw in accordance with the withdrawal deadlines.

| Douala: | Date: |
|---------------------|-------|
| | |
| Signature of Parent | |





| For Official Use | |
|--|-----|
| Registration N° | |
| Application fee received | |
| Date of interview with Head of Section/ Headteacher | |
| Head of Section/Headteacher remarks | |
| Place offered / Not offered | 2 8 |
| Place accepted / Not accepted | |
| Date of application withdrawn | |
| Reason for withdrawal | |

Head of Section

Headteacher

