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|  | Registration Form Student |

Particulars of the student

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| --- | --- |
| Surname: | First name: |
| Date of birth: | sex: male female |
| Place of birth: |  |
| Religion: | catholic  protestant  other: |
| First language: | Colloquial language: |
| German knowledge: | none  little  good |
| Sibling: (first name, year of birth) |  |

Particulars of the parent or legal representative

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| --- | --- |
| Legal represent: | Parents  Mother  Father  Foster parents |
| Mother: (surname/ first name) |  |
| Address: | (only if not identical to the address of the child) |
| E-Mail: |  |
| Father: (surname / first name) |  |
| Address: | (only if not identical to the address of the child) |
| E-Mail: |  |

Prior place of residence

|  |  |
| --- | --- |
| Street and No.: |  |
| ZIP and Place: | Canton/Country: |

New place of residence

|  |  |
| --- | --- |
| Street and No.: |  |
| ZIP and Place: | Moving date: |
| Phone 1\*: | Phone 2: |
| \*This telephone number may be used for the class list. | |

Last visited school

|  |  |
| --- | --- |
| Place of school: |  |
| Level/Class: |  |
| Teacher: | Phone: |
| Last school day: |  |

School history

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| --- | --- | --- | --- |
| Entry date: | Date: | Place: | Canton/Country: |
| Kindergarten, voluntary year |  |  |  |
| Kindergarten, obligatory year |  |  |  |
| Primary school |  |  |  |
| Secondary school |  |  |  |

Remarks

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If only one parent signs the form, his or her signature confirms that he or she is a single parent or that he or she is signing with the consent of the other parent.

Confirmation for the correctness of the abovementioned information

|  |  |
| --- | --- |
| Place, Date | Signature of the parent or legal representative |
|  |  |

Please do not forget to register yourself also at the registration office, Mandelhof, 6330 Cham, as soon as you moved to Cham.