

International School of Karachi

D-106, Block 2, Clifton. Karachi. Pakistan.
Phone: (+92) 21 35291432 E-mail: info@isk.edu.pk



Insert 4 Recent Passport
Sized Photographs Here

SCHOOL APPLICATION FORM

OFFICE USE ONLY		Application received on ____/____/20____		
School	<input type="checkbox"/> Primary	<input type="checkbox"/> Secondary	Class applied for	
Admission Fee			Age	
			Class admitted	
	<input type="checkbox"/> Accepted	<input type="checkbox"/> Declined	G.R. No.	

1. STUDENT DETAILS AS ON PASSPORT

First Name		Middle Name	
Sur Name		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female

Nationality		1st Language	
Place of Birth		Other Languages	
Date of Birth		Fluent in English	<input type="checkbox"/> Yes <input type="checkbox"/> No
Religion	<input type="checkbox"/> Muslim <input type="checkbox"/> Christian	Other	

2. PREVIOUS SCHOOLING OR PRE-SCHOOL

It is a requirement to submit a copy of your child's last school report with this form. Without a report this application will not be processed.

Previous School		Date of Entry	
Country		Date of Leaving	
Education System		Class on Leaving	
Principal Name			
Telephone			
Email			

3. LEARNING NEEDS/BACKGROUND INFORMATION

Does the child named above:

Have individual learning needs	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Notes
Require English language support	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Experienced development problems or delays	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Received learning support through therapy	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Had any problems at previous school	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Ever been excluded/suspended from school	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

4. OTHER FACTORS

Are there any academic, musical, artistic or sporting achievements that you wish to make us aware of?

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Are there any family circumstances you feel we should be made aware of?

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5. DETAILS OF FIRST PARENT (Father/Mother)

Sur Name		CONTACT DETAILS	
First Name		Address	
Title		Home Tel	
Nationality		Office Tel	
Occupation		Mobile	
Employer		E-mail	
Fluent in English	<input type="checkbox"/> Yes <input type="checkbox"/> No	Emergency Contact	<input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Mobile

DOCUMENTS REQUIRED WITH THIS APPLICATION:

1. Transfer letter / School leaving certificate
2. Passport copy (foreign nationals only) / Copy of Birth certificate
3. Last School Report
4. Admission Fee

6. DETAILS OF SECOND PARENT (Father/Mother)

Sur Name		CONTACT DETAILS	
First Name		PO Box	
Title		Home Tel	
Nationality		Office Tel	
Occupation		Mobile	
Employer		E-mail	
Fluent in English	<input type="checkbox"/> Yes <input type="checkbox"/> No	Emergency Contact	<input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Mobile

7. SIBLINGS CURRENTLY REGISTERED WITH ISK

Name		<input type="checkbox"/> Sister <input type="checkbox"/> Brother	Class	
Name		<input type="checkbox"/> Sister <input type="checkbox"/> Brother	Class	
Name		<input type="checkbox"/> Sister <input type="checkbox"/> Brother	Class	
Name		<input type="checkbox"/> Sister <input type="checkbox"/> Brother	Class	

By completing and submitting this application on behalf of the aforementioned child,

I

- Agree to remedial support for my child (if required) following assessment by the school
- Understand and agree to pay all fee dues from me on time. This includes any additional fees resulting from any necessary educational support provided for my child.
- Will recognise, support and abide by the school rules, policies and procedures.
- Understand that my child will be in a mixed class – ability, gender, nationality and religion.
- Declare that I am the parent/legal guardian of the aforementioned child.
- Confirm the information provided above is correct and complete.

Signed:

Date: