

Tel.: +202-21109874/5/6

Mob.: +201050385599

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STUDENT ADMISSION FORM

+201050330755

STUDENT ID NO: 8004 000000_ FOR SCHOOL USE ONLY Year applied for: Academic year applied for: Assessment date: ///20___ □ Yes □ No **Paid Registration fees** Paid Assessment fee **Ves No Place offered:** □ Yes □ No Start date: / /20 **Class admitted:** Head of Stage Approval: **Principal Approval:**

Birth Certificat	Certificate Passport Residency Fathe		Father ID		Mother ID						
Last School Re	port	8 Photos		Vaccinat	ions		Father Picture	e	Mothe	er Picture	
Siblings		Image usa	ige a	approval	[]	les	□ No				

Please complete using **BLOCK CAPITAL LETTERS**, sign and attach the required documents. **The information provided must be completed as on passport**

CHILD'S DETAILS	Name by which child should be known at School:								
First Name	Middle Name(s)			Surname					
Date of birth (dd/mm/yyyy)Place of			Birth			Nationality (Please mention if dual nationality)			
Gender:	🗆 Fei	male	Religion:			Muslim Christian Other			
Returning Student:	YES	ΠN	10	Date of	of At	tendance:			
What languages does your child speak? (sometimes/often/always) Fluent in English: I YES I NO					Fluent in English.				
What language is mostly used when speaking to your child at home?Are there any additional languages spoken at home?									
Has your child ever received a speech therapy and/or speech and language assessment? (if yes, please include the report)									

SCHOOLING HISTORY								
Current/Previous School		Address & Telephone			Language of Instruction:			
Date of entry	Date of	Leaving Year on leaving		·	Applying	for Year		
Current Education System:		□ British	□ American	🗆 Na	ational	□ Other		

Is it possible that your child requires special educational support?				□ Y	ES 🗆 NO				
Does your child have any physical/lea	arning/behavior	ral difficul	ties?		ES 🗆 NO				
Has your child encountered any diffic	ulties at his/he	r previous	school?		ES 🗆 NO				
If you have answered yes to any of the previous questions, please give further details and include copies of any relevant reports with this application (<i>Failure to disclose relevant information can make it impossible to provide adequately for your child's education</i>)									
CHILD'S HOME ADDRESS	1								
Area	Street								
Building no.	Apart/Villa no.								
PARENTS' MARITAL STATUS	□ Ma	rried	□ Se	□ Separated □ Divorced					
If divorced, child's custody is with: (official documents will be required)									
DETAILS OF CHILD'S FATHER		Tit			r etc)				
Surname	First name			Nationalit	У				
Occupation	Employer's Name								
Home tel.	Office tel.			Mobile no.					
Email for school correspondence									
DETAILS OF CHILD'S MOTHER	2		Title	(Mr/Mrs/Di	: etc)				
Surname	First name			Nationality					
Occupation	Employer's Name								
Home tel. Office tel.				Mobile no.					
Email for school correspondence									

GUARDIAN CONTACT INFORMATION IF OTHER THAN PARENTS						
Surname	First name	Relationship				
		Ĩ				
Home tel.	Mobile no.	Email address				

EMERGENCY CONTACT INFORMATION SHOULD WE BE UNABLE TO REACH PARENTS							
Surname	First name	e	Relationship				
Home tel.	Mobile no).	Email address				
SIBLINGS DETAILS							
Name	Age	Current Se	chool	Year Group			

IMAGE & NAME USAGE CONSENT

During the school year, we take photographs of school activities involving students to share the school's positive vibe and updates. Some photographs may include your child.

These photos may be published through our website, social media pages, news bulletins, billboards, and ads.

We seek your consent in allowing us to publish photos which may involve your child to the said platforms.

Photo Release Consent; please do provide your response by marking your preference below:

□ I hereby allow the reproduction and publication of my child's photograph(s)

I DO NOT allow the reproduction and publication of my child's photograph(s)

We reserve the right to record your child's photos and name for internal monitoring and progress assessment

Parent/Guardian's Name	Parent/Guardian's Name

ASSESSMENT TERMS AND CONDITIONS

Assessment

- Assessment processes and standards are determined by our Educational Team.
- An Assessment fee of EGP 1,500 is to be paid upon submission of the Student Admission Form.
- All required documents must be submitted in order to schedule an assessment date.
- If the child fails the assessment, he/she will be entitled to another free assessment.
- A parent interview with the School Principal will be scheduled on or before the assessment date
- In case of cancellation, the Assessment fee will only be refunded if the parent notifies the Admissions Office in writing at least 2 days prior to the assessment.

Parent/Guardian's Name	Parent/Guardian's Name

PARENT DECLARATION:

I, the undersigned, being the lawful parent or guardian of

hereby give my permission for the release to The GEMS British International School Madinaty of any and all academic or other records or information that may be considered relevant by The British International School Madinaty and that is held by my child's current / previous school(s).

I declare that no information relevant to this application has been withheld, and I understand that any offer of a school place for my child shall, at the school's sole and absolute discretion, be considered invalid if any of the statements contained herein prove to be inaccurate.

Medical Liability:

I agree that neither the GEMS British International School of Madinaty nor any of its affiliates, shareholders, directors, employees, consultants or agents shall be liable for any injury occasioned to the above mentioned child resulting from any improper medical treatment to his/her medical conditions if the parent or guardian fail to inform the school in writing of the child's exiting medical conditions; or fail to comply with the School's medical policy or other instructions provided by the School or its Health Office Staff.

The GEMS British International School Madinaty shall be under no financial responsibility in respect of any accidental bodily injury occasioned to the above-named child howsoever caused. I agree to indemnify and keep indemnified the said school in respect of any amounts the said school shall become liable to pay following any such injury to the said child.

Provision of Information to Parents:

The school will provide information about the child (reports cards, attendance records, and other related issues to the child's file) to either parents. If the school is made aware of a dispute between the child's parents, the school will then refrain from sharing information about the child with both parents in order to protect the privacy of communication. An official document confirming the name of child's guardian-in charge is then required to disclose any child's information.

I agree to abide by all school policies, which may be amended from time to time. The School policies are available upon request.

I agree to maintain my child's punctual and full-time attendance, respecting the school's term dates and calendar, except when sickness or unavoidable family circumstances prevent this. I agree to ensure that my child wears the correct uniform. I agree to pay all school fees on the due date.

I confirm that, to the best of my knowledge, all the information supplied by me is a true and accurate record.

Child Parent/Guardian's Name:_____

Child Parent/Guardian's Signature:

Date: _____

REMARKS & FOLLOW UP ACTION

DATE	COMMENTS	LI YES	DD NO	INITIAL



المستندات المطلوبة للتسجيل/REQUIRED DOCUMENTS FOR ADMISSION

Part I: The required documents for the admission process

- □ Original birth certificate computer generated (Egyptian students)
- □ Copy of the student's passport and a copy of the residence visa valid for not less than 6 months and not a touristic visa (non-Egyptian students).
- \square 8 recent passport sized photos of the student.
- □ Copy of mother and father's ID (National Number) and copy of the passport for non-Egyptian parents.
- □ Copy of the vaccination record (for EYFS)
- □ Original academic report from the previous school for the last academic year.
- □ Stamped attendance statement from the previous school starting from Year 1.
- □ Letter of good conduct from the previous school for students Year 6 and above.

Part II: Additional documents required for those students transferring within Egypt:

If transferring from a school within Egypt, all the above -mentioned documents are required in addition to:

- □ Attendance statement or success report for the last academic year stamped from the Educational District.
- □ Transfer request stamped from both the school the student is transferring from and the Educational District.
- □ Electronic transfer request from the previous school.

Р

Guardian's Name:

Part III: Additional documents required for those students transferring from abroad:

If transferring from abroad, all the documents in Part 1 are required in addition to the following:

- □ Attendance statement from the previous school notarised by the Ministry of Education of the country the student is transferring from and by the Egyptian Embassy.
- □ Last school report notarised by the Ministry of Education of the country the student is transferring from and by the Egyptian Embassy.
- □ Issuing a letter of admission from the Educational District for both Egyptian and non-Egyptian students transferring from abroad.

التحاق.	البند الأول : المستندات المطلوبة لإستكمال إستمارة الإ
للأجانب عليه إقامة لغير السياحة	أصل شهادة ميلاد كمبيوتر للمصريين أو صورة من جواز السغر
	🗖 ولاتقل عن 6 أشهر .
	🗖 8 صور شخصية للطالب .
سور من جواز السفر للأجانب .	🔲 صور من بطاقة الرقم القومي للأب والأم للمصرين وم
	🔲 أخر شهادة دراسية الآخر عام دراسي
لب .	تسلسل دراسى مختوم من المدرسة المنقول منها الطا
اخل جمهورية مصر العربية .	البند الثانى : مستندات إضافية في حالة التحويل من د
	فى حالة التحويل من مدرسة داخل جمهورية مصر العربية تقدم
ارة التعليمية .	🔲 بیان قید أوبیان نجاح لأخر عام دراسی مختوم من الإد
و مختوم من الإدارة التعليمية .	طلب تحويل مختوم من المدرسة المنقول منها الطالب
ها الطالب .	طلب تحويل الكتروني مختوم من المدرسة المنقول من
لخارج .	البند الثالث : مستندات إضافية في حالة التحويل من ا
	فى حالة التحويل من مدرسة خارج جمهورية مصر العربية تقد
لب ومصدق عليه من وزارة التربية والتعليم للبلد العائد منها وأيضآ	تسلسل در اسى مختوم من المدرسة المنقول منها الطا
	مصدق عليه من وزارة الخارجية المصرية .
لد العائد منها وأيضاً مصدق عليه من وزارة الخارجية المصرية .	ختم أخر شهادة دراسية من وزارة التربية والتعليم للبا
	استخراج طلب الحاق مصرى عائد من الخارج من الإد
من الخارج من الإدارة التعليمية .	استخراج طلب الحاق طالب وافد (في حالة الأجانب) م
Parent/	
Guardian's Name	Signature:



HOME-SCHOOL AGREEMENT

- I understand that it is important to contact PRE and other Front of the House staff to liaise with the school and I will use these channels to report any immediate concerns that I may have.
- I understand that it is a requirement that all students attend all parts of the curriculum.
- I understand that part-time students are not accepted and that 100 per cent attendance is expected apart from instances of genuine illness.
- I understand that it is essential that my child attends school every day and is punctual.
- I will inform the school of sickness or lateness at my earliest convenience.
- I agree to make sure that my child does his/her homework as directed by their teacher.
- I agree that I will set aside time to ask my child how their day went.
- I understand the importance of meeting with the relevant teachers termly through the medium of the parent consultation evening.
- I will ensure that my child goes to bed at a reasonable hour in order to be ready to learn at school.
- I understand that my child requires a happy, welcoming and safe environment in which to learn and I agree to accept the school's discipline policies.
- I agree to ensure that my child comes to school in the correct uniform so that he/she is part of our school community.
- I will make sure that my child is well-equipped for school.
- I will always expect good manners and presentation from my child as is befitting a British School pupil.
- I understand that the school is only concerned with the welfare of the child and does not become involved in family disputes of any kind.
- I will make sure that my child will comply to all health and safety procedures as instructed by the school based on what is appropriate for his/her age group

Please note that persistent breaches of the below agreement may lead to suspension and/or expulsion at the discretion of the school.

I accept the Home School Agreement and will endeavour to support its contents.

Child's Name:	Year Group:
Parent/ Guardian's Name:	Signature:



MEDICAL INFORMATION SHEET

It is the Parent/Guardian's responsibility to inform the school if there are any changes in the child's medical condition(s)

To ensure the safety of your child during the school day, any extracurricular activities, or any field trip, it is important that the school is made aware of any health conditions that may impact your child. Please fill in the below required information. For confidentiality purposes, this information will only be shared with the relevant school staff.

Please ensure your child's <u>VACCINATION RECORD</u> is attached.

CHILD'S DETAILS	Name by which the child should be known at the BISM: (Legal name?)							
First Name	Middle Name(s)				Surname			
Date & place of birth (dd/								
		Gender	□ Male	☐ Fema	le	Year Group		
Mother's Mobile No.		Father's Mobile No.			Other Emergency Contact			
IT IS IMPERATIVE TO KEEP US INFORMED OF ANY CHANGES TO YOUR CONTACT DETAILS								

MEDICAL CONDITIONS: <i>Please complete the following circling "Yes" or "No".</i>							
Does your child suffer from	Please Circle		Has your child ever had any of the following diseases Please Circle				
Diabetes	YES	NO	German Measles (Rubella) YES NO				
Food Allergies	YES	NO	Measles YES NO				
Other Allergies	YES	NO	Mumps YES NO				
Drug allergies	YES	NO	Chicken Pox YES NO				
Eyesight Difficulties	YES	NO	Meningitis YES NO				
Hearing Difficulties	YES	NO	Hepatitis YES NO				
Take Regular Medication	YES	NO	Glandular Fever YES NO				
Eczema	YES	NO	Whooping Cough YES NO				
Undergone /Past Major Surgery	YES	NO					
Epilepsy	YES	NO	Please name the medication				
Non-Epileptic Convulsions	YES	NO	Please name the medication				
Any Serious Illness	YES	NO					
Asthma – Requires regular medication	YES	NO	Please name the medication				
Mild Asthma	YES	NO					

If you answered "Yes" to any of above-stated medical conditions, please provide further details. The School cannot accept responsibility for consequences resulting on omitting any information related to this medical sheet.

In addition to above, are there any other details you feel the school should be aware of regarding your child's health?

Please list any other precautions that need to be taken during PE sessions

MEDICAL TREATMENT AUTHORISATION & DECLARATION *Please read the following carefully before signing the authorisation below:*

Non-emergency Medical Treatment

"Non-emergencies" occur every week, when students come to the Clinic with minor ailments. These can be treated with generally available medications.

The medications that are held by the school or their equivalent are: Paracetamol, Panadol or Cetal and Ibuprofen, Brufen for fever; Strepsils or Maxillase for throat irritation; Gaviscon for heartburn; Motinorm for nausea and vomiting; Visceralgine and Simethicone for abdominal pain; Antinal for diarrhea; antihistamines as Telfast or Claritine and Phenadone for allergic reactions; Rotahelix or Ivy prospan for cough; Ventolin syrup for asthmatic patients; Sine-up or Rhinopro and Otriviun pediatric nasal drops for cold remedies, Otal drops or Viotic drops for ear inflammation; Tobrin drops for eye infection or Trillerg drops or Tears Natural drops for eye irritation.

If you would like your child to be able to be given any of these mild treatments, the school requires your written authorisation in the form of your signature below. The Medical staff will not administer medication to your child without this authorisation. You should therefore accept that your child could remain in discomfort if we have no authorisation to administer one of the mild medications.

Please circle one of the following options:

I hereby authorise BISM to administer medications, at the discretion of the BISM Medical staff.

OR

I hereby instruct BISM NOT to administer any medication for minor ailments.

Emergency Medical Treatment

I have no objection to the Medical staff in the BISM Clinic administering necessary medication to my child, or to my child being taken to a hospital for treatment, if required. When emergency action is taken to safeguard your child, the school will seek to advise all concerned straight away.

I understand and agree to all aspects of the above declaration.

My Choice

My Choice



FINANCIAL AGREEMENT FOR 21/22 ACADEMIC YEAR

Your child's place at BISM is subject to all financial dues being paid on time and the first instalment settled before the start of the Academic Year.

Admission Fee

Once your child is accepted and offered a place, a one-time admission fee of EGP 10,000 is to be paid to secure his/her place at BSIM. This fee is **non- refundable.**

Payment should be done within 48 hours from the date of the Acceptance Offer.

Down payment/1st instalment

Your child's place is only guaranteed once we receive the down payment and/or the first instalment in fullwhichever is applicable at the time your child was offered the place.

School fees

All related school fees must be paid on or before the due date of the relevant School term .

Tuition fees include the annual tuition fees and the additional service fees.

Tuition fees does not include transportation, uniform, books, non-educational trips or canteen.

Parent/Guardian should comply to the payment schedule set by the School's Account Department for the relevant Academic Year.

Application Withdrawal

If the parent/guardian wishes to withdraw his/her child's application, he/she must submit a written request to the Admission Office stating the reason for their withdrawal. Paid School Fees are non-refundable and it will only incur in the most exceptional cases and will be in line with local regulatory guidelines outlined in the full Fee Guide on the school website.

Student withdrawal prior to the start of the Academic Year:

Refunds as per the Regulation of the Ministry of Education).

Before 31st of August, parents/guardian are granted a full refund of paid tuitions fees.

After 1st of September until the first day of school, parents are granted 90% of the paid tuition fees.

After the start of the school year, paid tuition fees are non-refundable.

Re-enrolment.

A re-enrolment practice for current students usually takes place during the month of April of each academic year. Parents are then requested to confirm in writing if their child is returning in the next academic year; and to make a down payment to hold their child's place for the next academic year within the communicated time frame. This payment is a part of the 1st instalment fees of the academic year.

Child's Name:	Year Group:
Parent/ Guardian's Name:	Signature:



FINANCIAL AGREEMENT FOR 21/22 ACADEMIC YEAR

Year Group	Entrance Fees	Tuition Fees 20/21*	Upon acceptance down- payment	Due in April 2021	Due in June 2021	Due in August 2021	Due in October 2021	Due in January 2022
PS	10,000	74,000	25%		25%	20%	20%	10 %
FS1	10,000	75,214	25%		25%	20%	20%	10%
FS2	10,000	100,120		20%		30%	25%	25%
Year1 Year2	10,000	131,285		20%		30%	25%	25%
Year 3 Year 4	10,000	141,795		20%		30%	25%	25%
Year 5 Year 6	10,000	144,406		20%		30%	25%	25%
Year 7 Year 8 Year 9	10,000	149,450		20%		30%	25%	25%
Transportation Fees						50%		50%
Book Fees						100%		

*The above fees are subject to an annual increase as per approval from the Ministry of Education.

Child's Name:	Year Group:
Parent/ Guardian's Name:	Signature: