



## SCHOOL INFORMATION FORM

**DEAR PARENTS,**

This form must be completed and signed by school personnel. We thank you for your cooperation!

### Academic Information

Student's Name					
Name of Current School		Country		City	
School Phone Number		School Type	<input type="checkbox"/> Public	<input type="checkbox"/> Private	<input type="checkbox"/> Boarding <input type="checkbox"/> Other
Years Attended					
Current Grade		Last Grade Completed in your system			

Name of school personnel officer filling out this form			
Position			
E-mail			
Phone number			
Signature		Date	

### Admission Information

How long has this applicant been in your school?			
What percentage of the day does the student receive instruction in English?			
Has the applicant skipped a grade?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If so, which grade:	
Has the applicant repeated a grade?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If so, which grade:	
Has the applicant been disciplined by the school administration?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please explain:			
Suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Expelled?	<input type="checkbox"/> Yes <input type="checkbox"/> No

