



ENROLMENT APPLICATION
CAIRO ENGLISH SCHOOL
 MIRAGE CITY, NEW CAIRO, EGYPT
 TEL: +202 2249 0200 FAX: +202 2409 1625
 Email: registrar@cesegypt.com

To be filled in CAPITAL letters where applicable

Student No:	Student Information		
First Names		Family Name	
Date Of Birth	/ /	Place of Birth	
Male/Female		Passport/Birth Cert. Number	
Citizenship		Religion	

Parent Information	Father	Mother
Full Name (F/M/L)		
Citizenship		
Religion		
Occupation		
Company's Name		
Company's Contacts		
Education/Degree		
Education Institution		
Business Phone		
Mobile Phone		
Home Phone		
Email		
Do you speak English?	Fluently Reasonably well Not well	Fluently Reasonably well Not well
How often do you read your e-mails?	daily <input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/>	daily <input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/>
Parental marital status	<input type="checkbox"/> married <input type="checkbox"/> separated <input type="checkbox"/> divorced	if so, custody with.....
Home Address		

Brothers and Sisters			
	Name	School	Date of Birth
1			
2			
3			
4			

Emergency Contact (if parents are not available)	Relationship
Phone Numbers	

ACADEMIC HISTORY	School/Nursery and Country - applicants for FS1 & FS2	School Website	Years Attended
Current School			
Previous Schools			
Applying for Admission to Year/Grade: <input style="width: 100px;" type="text"/>	For the Academic Year:	Term	
		1	2
			3

Has he/she any special medical conditions?	YES / NO		
If 'YES' please give details.			
Has he/she ever received services for learning disorders/special assistance?	YES / NO	If 'YES' which Year?	
If 'Yes' please give details.			
Has he/ she ever been identified as being gifted or talented?	YES / NO		
Have you ever applied to CES before?	YES / NO	If 'YES' which Year?	
Has he/she ever repeated a Year?	YES / NO	If 'YES' which Year?	
Has he/she ever skipped a Year?	YES / NO	If 'YES' which Year?	
Language most commonly spoken at home	<input type="checkbox"/> English <input type="checkbox"/> Arabic <input type="checkbox"/> Other		
Will the student require bus transportation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not decided yet		

Does the student live with:	Both parents YES/NO	Mother YES/NO	Father YES/NO	Guardian YES/NO
Name of Guardian if relevant				
Telephone Nos	Home		Mobile	
E-mail address				

You may publish our Address/Tel No. in the 'CES Telephone Directory'.	YES/NO
You may publish our E-mail Address in the 'CES Telephone Directory'.	YES/NO
Photographs of my child may be used on the CES Website or advertising.	YES/NO

I hereby apply for admission of my son/daughter to the Cairo English School and agree that my child will abide by and support all of the rules, code of conduct and regulations of the school. I certify that the above information is true and accurate.

I accept that the school reserves all rights not to disclose reasons in case of refusal of admission.

Tuition fees can be paid in four installments and **must** be paid prior to the start of each of the three terms.

No student will be admitted to classes on the first day of the academic year/term without settlement of all due fees.

Signature:

Date:

For School Use Only				
Documents	Arabic	Accepted into Year	Academic Year	Start Date
Accepted H/Admissions _____				
Accepted LS/US _____				
Photographs _____		Probation _____		
School Records _____		Bus Form _____		
Birth Certificate/Passport _____				
School Reports _____		Entered on database _____		
First Installment Fee _____				