

SCHOOL YEAR APPLICATION 2023/2024

Object: application procedure 2023-2024

File followed by: Véronique Pointereau
ibapplications@sem-walbourg.eu

Madam, Sir,

You have decided to enroll your child to Sem' Walbourg. We invite you to follow the procedure below:

1. Please download the file, fill it in and mail it with the following documents :

Documents to submit with the application

- ✓ 2 recent pictures stapled to the application file,
- ✓ Copy of the 3 last report cards,
- ✓ 30 € (check) to cover the costs of handling.

2. After the examination of the application, we will schedule a meeting with the board members.

3. You will be informed about the board's decision **within two weeks**. Under acceptance of your application, the deposit will be collected :

- 1.000€ for half-boarding
- 1.500€ for full-boarding
- 2.000€ for full-boarding & week-end

We encourage your prompt attention to the enrolment forms in order to ensure your place in Sem Walbourg.



CLASS : **Grade 10** (option prepa IB) **Grade 11 IB1**
STATUS: **Full boarding** **Half boarding** **Full Boarding & WE**

Options:

*RECENT
PICTURE
GLUE
HERE PLEASE
+
1 extra picture*

STUDENT INFORMATION

NAME:	FIRST NAME:	Girl <input type="checkbox"/>	Boy <input type="checkbox"/>
Birthdate date:	Place of birth:	Nationality:	
FORMER SCHOOL:			
Class:	School:	state <input type="checkbox"/>	private <input type="checkbox"/>

PARENTS' INFORMATION

Marital status: Married <input type="checkbox"/> Civil partnership <input type="checkbox"/> In a relationship <input type="checkbox"/> Separated* <input type="checkbox"/> Divorced* <input type="checkbox"/> Widow <input type="checkbox"/>			
*IT IS MANDATORY TO JOIN THE COPY OF THE DIVORCE JUDGEMENT AND THAT BOTH PARENTS SIGN THE ADMISSION'S PAPERS			
FATHER	MOTHER	Legal guardian <input type="checkbox"/>	Legal guardian <input type="checkbox"/>
Name and first name:	Name and first name:		
Address:	Address (only if different):		
Phone: Unlisted <input type="checkbox"/>	Phone: Unlisted <input type="checkbox"/>		
Mobile:	Mobile:		
Mail:	Mail:		
Profession:	Profession:		
Employer's name and address:	Employer's name and address:		
Professional phone:	Professional phone:		
In case of separation or divorce: where does the student live?		Mother <input type="checkbox"/> Father <input type="checkbox"/>	Other <input type="checkbox"/> Specify:



INFORMATION ABOUT THE PAYER (if different from Legal Guardian)

Payer Name and first name: Family ties: Address: Phone: Unlisted <input type="checkbox"/> Mobile: Mail:	Back up payer (if lack of payment from the main payer) Name and first name : Family ties: Address: Phone: Unlisted <input type="checkbox"/> Mobile: Mail:
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INFORMATION ABOUT BROTHER AND SISTER

Name and first names of kids Civil registry order	Gender	Year of birth	School at the present time	Your responsibility Yes/No

For the purpose of administrative, financial and statistic management, asked information is mandatory. The information will be updated by computer and send to the Board of Education. At the end of schooling, information is kept in the archives of the school. In accordance with the Law of the 6th of January 1978, you have the right to control and rectify any information about you.

We authorize Sem' Walbourg to use this information for the sole purpose of computer management.

Done at _____ , **on** _____

Parents' signatures



NAME:

FIRST NAME:

REQUESTED GRADE:

Please give the reasons for applying for Sem' Walbourg ?

Does your child like studying? Does he/she work autonomously?
Is he/she successful? If yes, why? If no, why ?

What are your child's hobbies ?

School's academic project is linked to our status of Private Catholic School. Do you agree with it ?

What about your child?

« By submitting this application, you are confirming that you agree with our terms, that the information you provided is correct and that you will advise the School board, in writing, of any changes to the information on this form.

Done at on

Father's signature:

Mother's signature:

Child's signature:

