

Family Code For Administrative Use

Father's Name _____

Father's Nationality _____

Mother's Name _____

Mother's Nationality _____

The main contact is: Father Mother Other _____

Remarks (Divorce, Death, other): _____

In case of divorce or separation, presentation of custody papers is required.

STUDENT INFORMATION

	Student 1	Student 2	Student 3	Student 4
First Name				
Family Name				
Nationality				
Female / Male				
First Language				
Date of Birth				
Religion				
Applying to Grade				
Previous School				
City/Country				
Curriculum				
Emirates ID#				

EMERGENCY TREATMENT

PLEASE READ AND SIGN THE FOLLOWING STATEMENT.
 I hereby authorize the medical personnel of the International School of Arts & Sciences (ISAS) or any other qualified medical officer to administer emergency treatment and/or first aid treatment that my child/children may need during the course of a normal school day or during any school supervised activity.

Parent's Name: _____

Date: _____

Signature: _____

Kindly list any medical issues/allergies that the school should be aware of.

Student's Name	Grade	Medical Issues / Allergies

Parent's/Guardian's Name & Signature:

TRANSPORTATION FORM

Student Code <small>Admin. use only</small>	Student Name	Grade & Section	To	From	T & F	E1	E2

DETAILS OF RESIDENCE AND CONTACTS

EMIRATE: _____ AREA NAME: _____ MAKANI# _____
 STREET: _____ BUILDING/COMPOUND: _____ APARTMENT/VILLA NUMBER: _____
 RESIDENCE TEL: _____ OFFICE TEL: _____ MOBILE: _____

KINDLY USE THIS SPACE TO DRAW A MAP TO YOUR RESIDENCE

Date: _____ **Guardian / Parent's Initials & Signature:** _____