



(Former Swedish Community School PCO) Addis Ababa, Ethiopia

ENROLLMENT APPLICATION

INSTRUCTIONS:

All items must be completed to the best of your ability, and must include the following:

- a. Application Form
- b. Previous transcripts (Including IEP forms, as applicable)
- c. Parent and student passport copies
- d. Parent and student passport photos (four each)
- e. Student Birth Certificate
- f. Health Declaration Form (including immunization record)
- g. Letter of Recommendation Form (if applicable)
- h. Photo and Video Consent Form
- i. Non-refundable Registration Fee of USD1000 (once space is confirmed)

Return completed application to:

Former Swedish Community School
PCO/Kelem International School (KIS),
DAR Sahara Street, Kazanchis, in front
of Norwegian Commissions Or email
them to: admissions@scsaddis.com

PLEASE COMPLETE ENROLLMENT APPLICATION BELOW—FRONT AND BACK

SECTION ONE:

Student Name:

House Number: Woreda: Sub-city:

Previous School(s) Attended:

Student Date of Birth (DD MM YYYY): Age: Gender:

Guardian 1 Name: **Guardian Cell Number:**

Guardian Work Number:

Guardian 2 Name: **Guardian Cell Number:**

Guardian Work Number:

Former School Leader Name: **Work Number:**

Work Email:

Former School Teacher Name: **Work Number:**

Work Email:

What grade are you applying for? **Date:**

Note: KIS will email a **CONFIDENTIAL** Recommendation Form to your child's previous teacher you share contacts for.

SECTION TWO:

- A. Has your child ever been expelled before? Yes No
- B. Does your child have any behavior issues on his/her record? (If so, please explain)
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.....
- C. How did you hear about us? Friend/Relative Website Other

PLEASE ANSWER THE FOLLOWING QUESTIONS IN COMPLETE SENTENCES.

- A. Why are you choosing to apply to our school?
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- B. How long has your child been out of school (if applicable)?
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- C. What has kept your child from being successful at his/her previous school (if applicable)?
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- D. What are your child's hobbies and interests?
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.....
- E. Challenges your child have faced in the past—Check all that apply:
 - Skipping school
 - Health issues
 - Parenting/Childcare
 - Family Obligations
 - Family Crisis
 - Behavior
 - Uprooting/Sudden relocation
 - Other
- F. Please mark all areas in which your child needs additional support on: Math English Science
- G. Is English your child's first language? Yes No
- H. Does your child have any Special Education Needs? Yes No
- I. Is your child currently on an Individualized Educational Plan (IEP)? Yes No

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| This application is not complete until we have → | 1 | Application Forms | 2 | Transcript Copy | 3 | Identity Documents | 4 | Letter of Recommendation Form (when necessary) | 5 | Health Declaration and Photo & Video Consent Forms | 6 | Registration Fee and any other applicable fees |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |