

Personal details student

<u>Sur name</u>		
First names		
Call Sing		
Gender ☐ Girl ☐ Boy		
Date of birth		
*Citizen service number		
*Education number (if known)		
Country of origin		□ n.a.
When did you come to the Netherlands (date)		□ n.a.
First Nationality		
Second Nationality		□ n.a.
Street and house number	Zip code_	
City	Secret address	□ No □ Yes
Data from previous education		
Name school origin		□ n.a.
Country school origin		☐ n.a.
Has been in education since (dd-mm-yy)		☐ n.a.
Extra mobile number for emergency		
Name	Telephone number	
Name	Telephone number	

For the date exchange with the Education Executive Agency (EEA), the school needs a citizen service number (CSN) from the student. If a student does not have a CSN at the time of registration, the education, the education number used for this.

^{*}Explanation CSN and Education number:

^{**}Not required, you can decide for yourself whether to fill in this field.

Medical data student

Allergies		□ n.a.
Medicine		□ n.a.
Name of your family doctor		
Street and house number doctor		
Zip code and city doctor		
Phone number doctor		
Personal details parent 1		
Sur name		
First name		
Initials		
☐ Mrs ☐ Sir		
Country of birth		
Mobile number	Is this number secret	□ No □ Yes
Phone number work	Is this number secret	□ No □ Yes
<u>E-mail</u>		
Relationship to child		
Legal authority ☐ No ☐ Yes		
Address if different from the student		
Street and house number	Zip code	
City	Secret address	□ No □ yes

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Personal datails parent 2

<u>Sur name</u>		
First name		
Initials		
☐ Mrs ☐ Sir		
Country of birth		
Mobile number	Is this number secret	□ No □ Yes
Phone number work	Is this number secret	□ No □ Yes
<u>E-mail</u>		
Relationship to child		
Legal authority ☐ No ☐ Yes		
Address if different from the student		
Street and house number	Zip code	
City	Secret address	□No□ve

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Permission to use photos and videos f	rom child		
School guide, school brochure en school calendar	☐ No permission ☐ Permission		
On the school's website	☐ No permission ☐ Permission		
In the (digital) newsletter	☐ No permission ☐ Permission		
On the school's social media accounts	☐ No permission ☐ Permission		
Additional Notes			
· 			
Statement school			
The information in this form will be treated confidential right to inspect the administrative data of the child and			
Signature			
Parent 1	Parent 2		
Name	Name		
Date	Date		

Signature

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Signature

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