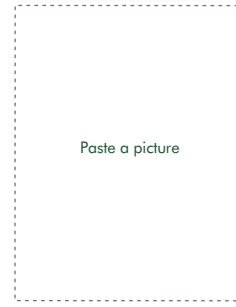




Abdulaziz
International Schools
Al-Wadi



Academic Year 20__ - __

First Name: _____: الإسم:

Father's Name/Middle Name: _____: إسم الأب:

Family Name: _____: اللقب (إسم العائلة):
Passport Spelling كما ورد في جواز السفر

Grand Father's Name: _____: إسم الجد:

Gender: ذكر Male أنثى Female: الجنس: Date/Place of Birth: _____: التاريخ / مكان الولادة
(Day/Month/Year) (City/Country)

Nationality: _____: الجنسية: 2nd Nationality: _____

ID/Iqama #: _____ Religion: _____

Sibling(s) attending SABIS® Network school Yes No School Name: _____

• Transfer Yes No SABIS® Network school: _____

• New Admission Yes No

Has your child previously applied to a SABIS® Network school? Yes No

If yes, which SABIS® Network school? _____ Academic Year _____

Has your child previously attended a SABIS® Network school?

If yes, which SABIS® Network school? _____ Academic Year _____

For School Use Only

Date of Application _____: (Day/Month/Year) Application N° _____

Student Computer N° _____ Parent Number _____

School Transportation Services Yes No Undecided Bus N° _____

Receipt Number - Application Fees _____ Date _____: (Day/Month/Year)

Receipt Number - School Fees _____ Date _____: (Day/Month/Year)

Applying for Level _____ 2nd Language _____

Info Completed by _____ Date _____: (Day/Month/Year)

Accepted in Level _____

With Summer School Yes No

Full Special Yes No

Specials Math English Arabic French

Remarks _____

Director's Signature _____

Date _____: (Day/Month/Year)



Managed by
SABIS®

Previous School Information

Previous School _____ Country _____

Previous grade (last attended) according to leaving certificate _____

ID Card # _____

Language(s) spoken at home English Arabic Other _____

Has your child ever skipped or been asked to repeat a school year? Yes No

If yes, kindly provide details. _____

Has your child been involved in any advanced, gifted/talented program, faced some sort of learning difficulty (speech/language therapy), or been tested for psychological purposes?

Yes No If yes, kindly specify. _____

Family Data

1st Guardian (The person to whom the school will send school reports and other official correspondence.)

Full Name (Dr.,Mr.,Mrs.,Ms.) _____

Relationship to Student _____ Nationality _____
First / Middle / Family

Occupation _____

Company Name _____

Work Address _____ P.O. Box _____

Work E-mail _____ Phone _____ Ext: _____

Home Address (District, Street, Bldg, Floor) _____

Personal E-mail _____

Home Phone _____ Mobile _____

2nd Guardian

Full Name (Dr.,Mr.,Mrs.,Ms.) _____

Relationship to Student _____ Nationality _____
First / Middle / Family

Occupation _____

Company Name _____

Work Address _____ P.O. Box _____

Work E-mail _____ Phone _____ Ext: _____

Home Address (District, Street, Bldg, Floor) _____

Personal E-mail _____

Home Phone _____ Mobile _____

To receive important school-related SMS messages on your mobile, please choose one

1st Guardian 2nd Guardian Mobile Number _____

Status of Parents Married Separated Other

If separated, who has custody of the child (legal documents may be required) Mother Father

Siblings (if any)

Name	Grade	School	Academic Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have any siblings graduated/attended a SABIS® Network school? Yes No

If yes: SABIS® Network school _____ Year _____

Does your child suffer from any medical conditions? Yes No

Is your child on regular medication? Yes No

Father or Mother Graduate of a SABIS® Network school

Is the applicant's father a graduate of a SABIS® Network school? Yes No

If yes, what year? _____ Which SABIS® Network school? _____

Is the applicant's mother a graduate of a SABIS® Network school? Yes No

If yes, what year? _____ Which SABIS® Network School? _____

Mother's Maiden Name _____

How would you like to receive your copy of the SABIS® Newsletter?

Via Mail Address _____

Via E-mail Address _____

Emergency Contacts Other than Parents

In case of emergency, who would you like the school to contact?

Name 1 _____ Relationship _____

Phone _____

Name 2 _____ Relationship _____

Phone _____

I, the guardian, confirm all the above details to be correct.

Name _____ Signature _____

Required Documents

You are kindly requested to complete your child's file as requested by the Ministry of Education (MoE) for registration approval, in order for the student to join the class.

A. Identification Documents

1. Three recent passport size photographs
2. Copy of renewed passports; student, mother and father (expiration page)
3. Copy of Birth Certificate
4. Copy of Vaccination Card

ID card as follows:

Saudi applicant:

- Copy of Saudi family card (front and back sides)
- Non-Saudi applicant and mother is Saudi: copy of mother's Saudi ID card
- Gulf Country Citizen (GCC) applicant: country citizenship ID.

Non-Saudi applicants:

- Copy of renewed resident permit (iqama); of student, mother and father plus expiry date from Absher (for student)
- Sponsor's letter from the guardian's work place

B. Academic documents: for student transferring from another school

1. Applying to Grade 1- and in the exemption age: KG report card with relevant conditions
2. Original school reports for all levels from Grade 1 till Grade __
3. Required attestations on the last report card, as follows:

o Previous school in Riyadh:

- From a different curriculum, embassy or community school: previous school must attest from the MoE
- National school: the parent must attest from the MoE
- Financial Clearance from previous school (not National)
- "Noor program" print-out to prove current grade level and transfer to our school.

o Previous school in another city in the Kingdom:

- 1 Previous school must attest from the MoE
- 2 "Noor program" print-out to prove current grade and transfer to our school.

o Previous school outside Saudi (abroad):

- 1 Last certificate attested from the MoE in previous country and Saudi Embassy.
- 2 Equivalence letter from the Saudi MoE

4. Applicant joining midyear: in addition to attestation on the last report card, midyear report card must be attested

Note: For the Saudi MoE specifics and contact details, please refer to the administration.

I, the parent of _____

guarantee to submit the required documents no later than _____

I am aware that students with incomplete files will not be able to join classes for the Academic Year and will not be officially registered in "Noor Program".

Parent's Name and Signature _____

Office Coordinator's Name and Signature _____