

# Application form

ENSR alumni:

 father  mother

- day student  mornings (Only Kindergarten Year 1)  
 boarding student: 5 days  
 boarding student: 7 days

**For Administrative use only**

Admitted in class: \_\_\_\_\_

Entry date: \_\_\_\_\_

Student number: \_\_\_\_\_

**Expected date of entrance:** \_\_\_\_\_

**Student's family name:** \_\_\_\_\_ First name: \_\_\_\_\_

 Gender:  male  female

Date of birth: \_\_\_\_\_ Place of birth (city / country): \_\_\_\_\_

Nationality(ies): \_\_\_\_\_ AVS number (required field): \_\_\_\_\_

**Father's family name:** \_\_\_\_\_ First name: \_\_\_\_\_

Profession: \_\_\_\_\_

Employer: \_\_\_\_\_ Office phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Home address: \_\_\_\_\_

Postal code: \_\_\_\_\_ City / country: \_\_\_\_\_

Private phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Mother's family name:** \_\_\_\_\_ First name: \_\_\_\_\_

Profession: \_\_\_\_\_

Employer: \_\_\_\_\_ Office phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Home address: \_\_\_\_\_

Postal code: \_\_\_\_\_ City / country: \_\_\_\_\_

Private phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Student's address during his/her schooling** (required fields):

- with father and mother  with father  with mother  other

Name of the child's legal guardian: \_\_\_\_\_

Address of this person: \_\_\_\_\_

Postal code: \_\_\_\_\_ City / country: \_\_\_\_\_

Private phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Bank reference:** \_\_\_\_\_

(required field for Boarding students)

**Invoicing address:** \_\_\_\_\_

**Health\*:**

Precautions to take: \_\_\_\_\_

Allergies: \_\_\_\_\_

Health issues / chronic conditions / other health-related matters: \_\_\_\_\_

Family doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

\* The student's data regarding health and dietary or other requirements will be processed by ENSR for the sole purpose of safeguarding the health and safety of the student, in particular to take, if necessary, appropriate medical measures. ENSR will not transmit this data to third parties, except teachers, assistants/accompanying persons, health professionals, the school's catering company or any other provider solely for the purpose of adapting meals and snacks offered to the student whilst in the care of the school and during extracurricular activities.

## Student's profile

Language spoken at home by student: \_\_\_\_\_ Language of instruction at school: \_\_\_\_\_  
Other languages spoken: \_\_\_\_\_ Since (year): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Specific difficulties: \_\_\_\_\_

## Previous school history

Name of school / city / country	Dates	Class
_____	_____	_____
_____	_____	_____
_____	_____	_____

Reference person: \_\_\_\_\_ School: \_\_\_\_\_  
\_\_\_\_\_

Sports played: \_\_\_\_\_

## Reason for transfer to ENSR International School

- |   |  |   |
|---|--|---|
| <input type="radio"/> Dissatisfied w. public school | <input type="radio"/> Dissatisfied w. private school | <input type="radio"/> Seeking French with English Programme |
| <input type="radio"/> Beginning of school career    | <input type="radio"/> Moving                         | <input type="radio"/> Seeking English with French Programme |
| <input type="radio"/> Montessori                    | <input type="radio"/> Temporary visit                | <input type="radio"/> Seeking caring environment            |
| <input type="radio"/> Agency _____                  |  | <input type="radio"/> Brother/sister at ENSR                |

## Documents

Please attach a photocopy of the **student's latest school report** with **1 passport photo**.

### For boarding students

- |                      |   |
|----------------------|---|
| Swiss nationals:     | attach photocopy of student's passport or identity card.  |
| Other nationalities: | attach photocopy of student's passport + birth certificate/identity card + vaccination record. In addition, 5-day boarding school students, with parents living in Switzerland, need to attach a photocopy of the student's health insurance card/certificate + Swiss residence permit. |

## Signature

We the undersigned, parents, legal guardian of said student, hereby declare having read and understood the Terms and Conditions of ENSR and accept the administrative and financial conditions, in particular deadlines and updates. We will honor this contractual agreement even when our child legally reaches adulthood and until the child leaves the school.

We hereby give our permission for the processing of our child's data concerning health and dietary requirements mentioned in this document, or given directly to ENSR staff members by the undersigned, for the purposes stipulated in this document.

Location / date: \_\_\_\_\_

Signature (father): \_\_\_\_\_

Signature (mother): \_\_\_\_\_

Signature (legal guardian): \_\_\_\_\_

Please complete, sign and send this form to:

**Ecole Nouvelle de la Suisse Romande**

Ch. de Rovéraz 20 - Case postale 161

CH - 1000 Lausanne 12 / Switzerland

Email: admissions@ensr.ch