



APPLICATION FORM

Child's photo

Father's Photo

Mother's Photo

CHILD DETAILS	
Full name :	Nationality:
Gender :	Religion:
Date of birth :	Place and country of birth:
Languages spoken :	Number of siblings and ages:
Joining Date:	
FATHER DETAILS	
Full name :	Nationality:
Religion:	Languages spoken:
Date of birth :	Place and country of birth:
Employed or self-employed:	Level of education:
Occupation :	Company name:
Contact numbers:	Email ID:
MOTHER DETAILS	
Full name :	Nationality:
Religion:	Languages spoken:
Date of birth :	Place and country of birth:
Employed or self-employed:	Level of education:
Occupation :	Company name:
Contact numbers:	Email ID:
IN CASE OF EMERGENCY – persons other than parent who can be contacted	
First contact name:	Relationship/Contact:
Second Contact name:	Relationship/Contact:

** Kindly fill all details of this form accurately as these will be uploaded on KHDA portal for student registration.

Parent name:

Signature:

Date: