



Family Code

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_  
 Father's Nationality \_\_\_\_\_ Mother's Nationality \_\_\_\_\_  
 Father's Emirates ID# \_\_\_\_\_ Mother's Emirates ID# \_\_\_\_\_

The main contact is:  Father  Mother  Other \_\_\_\_\_

Remarks (Divorce, Death, other): \_\_\_\_\_

*In case of divorce or separation, custody papers are required.*

**STUDENT INFORMATION**

	Student	Student	Student	Student
First Name				
Nationality				
Female / Male				
Date of Birth				
Religion				
Applying to Grade				
Previous School				
City				
Country				
Curriculum				
Emirates ID#				

**EMERGENCY TREATMENT**

**PLEASE READ AND SIGN THE FOLLOWING STATEMENT.**

I hereby authorize the medical personnel of Al Mawakeb School, or any other qualified medical officer to administer emergency treatment and/or first aid treatment that my child/children may need during the course of a normal school day or during any school supervised activity.

Parent's Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Kindly list any medical issues/allergies that the school should be aware of.**

Student's Name	Grade	Medical Issues / Allergies

Parent's/Guardian's Name & Signature: \_\_\_\_\_

# TRANSPORTATION FORM

Student Code <small>Admin. use only</small>	Student Name	Grade & Section	To	From	T & F	E1	E2

## DETAILS OF RESIDENCE AND CONTACTS

EMIRATE: \_\_\_\_\_ AREA NAME: \_\_\_\_\_ MAKANI#: \_\_\_\_\_  
 STREET: \_\_\_\_\_ BUILDING/COMPOUND: \_\_\_\_\_ APARTMENT/VILLA NUMBER: \_\_\_\_\_  
 RESIDENCE TEL: \_\_\_\_\_ OFFICE TEL: \_\_\_\_\_ MOBILE: \_\_\_\_\_

**KINDLY USE THIS SPACE TO DRAW A MAP TO YOUR RESIDENCE**

**Date:**

**Guardian / Parent's Initials & Signature:**