



ES SHEMEN INTERNATIONAL SCHOOL

Play Group/Pre-School/Grade 1 Application Form

Child's Name: _____

M/F: _____ Age: _____ Date of Birth: _____

Address: _____

Parent #1/Legal Guardian: _____

Cell Phone No.: _____ Email Address: _____

Parent # 2/Legal Guardian: _____

Cell Phone No : _____ Email Address: _____

EMERGENCY CONTACT: In case of emergency when parents cannot be contacted, we may contact:

Name: _____ Relationship to child: _____

Cell Phone No.: _____

Names of people, other than parents, who may pick up your child from school: (Please provide a passport size photo id.)

Please list anyone who is not to pick up your child:

Names, ages and relationships of other members of your household:

Does your child have allergies, or are there foods he/she should not eat for any reason?

PLEASE CHECK THE APPROPRIATE CLASS TO ENROLL YOUR CHILD IN:

_____ age 3 yr. **Play Group** _____ age 4/5 **Preschool** _____ age 5, 6, & 7 yrs. **Grade 1**

Age 5, 6, & 7 years students will take the ABCs of ACE Reading Readiness Test. Scores less than 80% to be placed in Preschool

School Hours 8–2 p.m. including lunch. 5,000 ugx after 2:00 p.m. pickup per hour.

Applications are not considered complete unless accompanied by the 100,000 ugx registration fee. Please attach two passport size photos of your child.

I hereby certify that, to the best of my knowledge, my child is physically and mentally able to participate in all the activities at Es Shemen International School. I understand and agree to the arrangements for payment of tuition.

Parent/Legal Guardian Signature: _____ Datte: _____

