

**Application Form**  
**201\_ / 201\_**

Please attach 1  
recent passport-  
size photo here

**FOR OFFICE USE ONLY**

Application #: \_\_\_\_\_ Admission Date: \_\_\_\_\_  
Date Received: \_\_\_\_\_ Class: \_\_\_\_\_

**CHILD INFORMATION**

Name in English (as in official documents):

\_\_\_\_\_  
(First) (Father) (Family)

Name in Arabic (as in official documents):

\_\_\_\_\_  
(إسم العائلة) (إسم الأب) (الإسم الأول)

Gender: Male  Female

Date of Birth: \_\_\_\_\_  
(Day) (Month) (Year)

Place of Birth: \_\_\_\_\_  
(City) (Country)

Nationality(ies): \_\_\_\_\_

Home Phone(s): \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street) (Building) (Floor)  
\_\_\_\_\_  
(City)

**FAMILY INFORMATION**

Father's Full Name: \_\_\_\_\_  
Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_  
Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

In case of an emergency, please specify the authorized people to be contacted:

	Full Name	Relationship to the Child	Cell Phone
1			
2			
3			
4			
5			

**RELEASE INFORMATION**

Please provide the following information about the people who are authorized to pick up your child from the ECC:

	Full Name	Relationship to the Child	Cell Phone
1			
2			
3			
4			
5			

**I, the undersigned, hereby certify that all information provided above is correct and understand that all documents submitted become the property of the ECC.**

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

Parent's Signature: \_\_\_\_\_

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

**ATTACHMENTS**

Please make sure to attach the following when submitting the application to the ECC:

1. One recent passport-size photo (taken within the past six months)
2. A clear photocopy of the child's identity card or passport