

**Submit the application either
by land mail or email to:**

International School of Schaffhausen
Mühlentalstrasse 280
8200 Schaffhausen
Switzerland

Email: info@issch.ch

www.issch.ch

APPLICATION FORM

Applicant Information

Last name _____

male female

First name _____

Date of Birth _____

Nationality 1 _____

Nationality 2 _____

Mother tongue _____

Candidate for admission to grade _____

Applying to the Early Learning Centre (age 3-6).

Please fill in an additional time booking form which will be provided by the ISSH admissions office.

Expected date of entry _____

How did you learn about ISSH?

employer

ISSH alumni

friends

advertisement internet

relocation agency (name) _____

other (name) _____

educational agent (name) _____



Family Information

Father (or guardian)

Last name

First name

Nationality

Profession

Current address

Home phone

Mobile phone

Phone office

E-mail

Address to send school correspondence to

Mother (or guardian)

Last name

First name

Nationality

Profession

Current address (if different)

Home phone

Mobile phone

Phone Office

E-mail

Siblings of applicant at ISSH

1. _____

2. _____

3. _____

4. _____

Employer/Company Information

Father's company of employment in Switzerland

Mother's company of employment in Switzerland

Payment of School Fees

Invoice for school fees should be sent to

Mode of payment

Company's name

Address

Contact person

Email

Phone

family

company

quarterly

annually

Additional Needs Information

student name _____

Providing us with accurate, comprehensive and up-to date information will help us to best accommodate the needs of your child. If you answer "yes" to any of the questions below, please specify and include copies of reports or other relevant information you might have.

<p>Additional Needs – Physical e.g. allergies, medication, asthma, special dietary requirements, speech, hearing, fine or gross motor skills etc.</p>	<p><input type="checkbox"/> yes <input type="checkbox"/> no</p>
<p>Additional Needs – Behavioural e.g. hyperactivity, bonding, attention deficit, autism, self-management, self-confidence etc.</p>	<p><input type="checkbox"/> yes <input type="checkbox"/> no</p>
<p>Additional Needs – Academic e.g. gifted, dyslexia, dyscalculia, processing disorder, organizational skills etc.</p>	<p><input type="checkbox"/> yes <input type="checkbox"/> no</p>

Transcripts / specialist reports

attached

to follow

Health and Medical Information

Has your child been immunized against

Tetanus	<input type="checkbox"/> yes	<input type="checkbox"/> no	Polio	<input type="checkbox"/> yes	<input type="checkbox"/> no
Mumps	<input type="checkbox"/> yes	<input type="checkbox"/> no	Measles	<input type="checkbox"/> yes	<input type="checkbox"/> no
Whooping cough	<input type="checkbox"/> yes	<input type="checkbox"/> no	Smallpox	<input type="checkbox"/> yes	<input type="checkbox"/> no
Rubella	<input type="checkbox"/> yes	<input type="checkbox"/> no	Diphtheria	<input type="checkbox"/> yes	<input type="checkbox"/> no

We strongly recommend you have your child vaccinated against ticks.

I give permission, should it be necessary, for the International School of Schaffhausen to consult a local physician or take my child to the emergency room at the hospital. Please note, that in case of an emergency we will always contact the parents as soon as possible. yes no

I give permission to the International School of Schaffhausen to administer my child with household remedies/over the counter medication to treat cuts, insect bites, sore throats and other minor cases. This does not include pain killers. yes no

Power of Attorney/Permissions

student name _____

Contact Details

Parent email addresses, mailing addresses and telephone numbers provided during the application process may be published to the school community and may be accessed by members of the ISSH community for school-related purposes. No information is given to persons or institutions outside the ISSH community. ISSH publishes regular Bulletins and Newsletters with important information about life at school, events and activities. All ISSH parents are automatically subscribed to all ISSH communication tools. You can unsubscribe at any time by writing an email to info@isssh.ch, but be aware that you will miss important information from school.

Publication of Images and/or Work of Students

As part of our teaching and learning programme and in the documentation and sharing of that programme, images and/or work of your child may be published online on the ISSH website, ISSH Newsletter and Bulletin, ISSH social media sites, other school moderated sites or other ISSH publications. Work samples can also be displayed as part of wall decorations. Students will not be identified by their full name with exception of the ISSH Yearbook and the password protected virtual learning environments.

Emergency Care

I/We grant permission for the staff of the International School of Schaffhausen to take all steps that may be necessary to obtain emergency medical care for my child if ever needed.

General Permission for Excursions

In order to provide our students with a wide range of learning experiences they will, at times, need to leave the school grounds under the supervision of a teacher or staff member.

In the case of a day trip or excursion that requires bus travel or public transport, you will be notified in advance and have the option of informing the school if you do not want your child to attend. If no objection is made, the parents grant permission to attend the trip. There must be a valid reason for withdrawing students from these outings, as they are an important part of the curriculum and therefore considered compulsory.

The general permission given below will cover day trips, excursions and visits to places of interest within walking distance of the school. For overnight trips and school camps you will be asked to sign a specific permission slip.

Permission to leave the school grounds unaccompanied

I hereby give permission for my child to leave the school grounds at the end of the school day unaccompanied (from grade 2 up)

yes no

I hereby give permission for my child to use the school's shuttle bus to and from the train station independently (from gr 1 up).

yes no

General Conditions and Financial Regulations

I hereby apply for enrollment and certify that the information provided is accurate, true and complete. If my child is admitted to the International School of Schaffhausen I agree to pay all fees as outlined in the ISSH Tuition Fees policy or as per special agreement with the school. I have read and accepted the above Power of Attorney/Permissions, the Financial Regulations and General Conditions.

This contract is subject to Swiss law. Exclusive place of jurisdiction is Schaffhausen (SH), Switzerland.

Date _____

Name _____

Signature _____