## **ENGLISH INTERNATIONAL SCHOOL**

Tel: 09999 38825

1154 Avenue Kasai, Commune Gombe, Kinshasa, D.R.Congo www.eiskinshasa.com Email: info@eiskinshasa.com

## **APPLICATION FOR ADMISSION**

Student Photo

1. Student Information:				
First Name:	Middle Init	ial:	Last Name:_	
D.O.Birth:	_Sex M/F:	Citizensł	nip:	
Passport #:	Date Issued:		Place:	
Last Grade Attended:	Last School	Attended:		
Previously Attended EIS?	If "Yes" Pe	eriod Atten	ded:	
2. Parent Information:				
FATHER			MOTHER	
Name:				
Citizenship:				
Office Address:				
Home Address:				
Mobile #:				
Email:				
<b>5</b>		N.A 1. 11 //		

## 3. Other Children in the Family:

(List from Youngest to Eldest including applicants name)

Name	Birt	Birth Date		Attending EIS Yes or No	Applying to EIS Yes or No
Educational History:					
. (List all schools attended a	nd dates attend	ed (list m	ost rec	ent schools firs	it)
-				_	<del>-</del>
School	City & Country	Langua Instruc		Years Attended	Grade Completed Year of Completion
	Country	motrac	J. 1011	Attended	rear or completion
Gifted & Talented Programs / Speech - Language services /	Learning Cente Counseling / E	r / Extendinglish as	ded Tuto a seco	oring / Special	Testing
Gifted & Talented Programs / Speech - Language services / Others: (explain )  Language Background:	Learning Cente Counseling / E	r / Extend nglish as	ded Tuto a seco	oring / Special <sup>-</sup> nd language cla	Testing asses
Gifted & Talented Programs / Speech - Language services / Others: (explain )  Language Background:  Applicants First Language	Learning Cente Counseling / E	r / Extendinglish as	ded Tuto a secon	oring / Special <sup>-</sup> nd language cla	Testing asses
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