



Academic Year 20\_\_ - \_\_

First Name: \_\_\_\_\_ الإِسْم:

Father's Name/Middle Name: \_\_\_\_\_ إِسْم الأب:

Family Name: \_\_\_\_\_ اللقب (إِسْم العائلة):  
Passport Spelling كما ورد في جواز السفر

Grand Father's Name: \_\_\_\_\_ إِسْم الجد:

Gender:  ذكر Male  أنثى Female الجنس: Date/Place of Birth: \_\_\_\_\_ التاريخ / مكان الولادة  
(Day/Month/Year) (City/Country)

Nationality: \_\_\_\_\_ الجنسية: 2<sup>nd</sup> Nationality: \_\_\_\_\_

ID/Iqama #: \_\_\_\_\_ Religion: \_\_\_\_\_

Sibling(s) attending SABIS® Network school  Yes  No School Name: \_\_\_\_\_

• Transfer  Yes  No SABIS® Network school: \_\_\_\_\_

• New Admission  Yes  No

Has your child previously applied to a SABIS® Network school?  Yes  No

If yes, which SABIS® Network school? \_\_\_\_\_ Academic Year \_\_\_\_\_

Has your child previously attended a SABIS® Network school?

If yes, which SABIS® Network school? \_\_\_\_\_ Academic Year \_\_\_\_\_

### For School Use Only

Date of Application \_\_\_\_\_ Application N° \_\_\_\_\_  
(Day/Month/Year)

Student Computer N° \_\_\_\_\_ Parent Number \_\_\_\_\_

School Transportation Services  Yes  No  Undecided Bus N° \_\_\_\_\_

Receipt Number - Application Fees \_\_\_\_\_ Date \_\_\_\_\_  
(Day/Month/Year)

Receipt Number - School Fees \_\_\_\_\_ Date \_\_\_\_\_  
(Day/Month/Year)

Applying for Level \_\_\_\_\_ 2<sup>nd</sup> Language \_\_\_\_\_

Info Completed by \_\_\_\_\_ Date \_\_\_\_\_  
(Day/Month/Year)

Accepted in Level \_\_\_\_\_

With Summer School  Yes  No

Full Special  Yes  No

Specials  Math  English  Arabic  French

Remarks \_\_\_\_\_

Director's Signature \_\_\_\_\_

Date \_\_\_\_\_  
(Day/Month/Year)

## Previous School Information

Previous School \_\_\_\_\_ Country \_\_\_\_\_

Previous grade (last attended) according to leaving certificate \_\_\_\_\_

ID Card # \_\_\_\_\_

Language(s) spoken at home  English  Arabic  Other \_\_\_\_\_

Has your child ever skipped or been asked to repeat a school year?  Yes  No

If yes, kindly provide details. \_\_\_\_\_

Has your child been involved in any advanced, gifted/talented program, faced some sort of learning difficulty (speech/language therapy), or been tested for psychological purposes?

Yes  No If yes, kindly specify. \_\_\_\_\_

## Family Data

**1<sup>st</sup> Guardian** (The person to whom the school will send school reports and other official correspondence.)

Full Name (Dr.,Mr.,Mrs.,Ms.) \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Nationality \_\_\_\_\_

First / Middle / Family

Occupation \_\_\_\_\_

Company Name \_\_\_\_\_

Work Address \_\_\_\_\_ P.O. Box \_\_\_\_\_

Work E-mail \_\_\_\_\_ Phone \_\_\_\_\_ Ext: \_\_\_\_\_

Home Address (District, Street, Bldg, Floor) \_\_\_\_\_

Personal E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile \_\_\_\_\_

**2<sup>nd</sup> Guardian**

Full Name (Dr.,Mr.,Mrs.,Ms.) \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Nationality \_\_\_\_\_

First / Middle / Family

Occupation \_\_\_\_\_

Company Name \_\_\_\_\_

Work Address \_\_\_\_\_ P.O. Box \_\_\_\_\_

Work E-mail \_\_\_\_\_ Phone \_\_\_\_\_ Ext: \_\_\_\_\_

Home Address (District, Street, Bldg, Floor) \_\_\_\_\_

Personal E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile \_\_\_\_\_

To receive important school-related SMS messages on your mobile, please choose one

1<sup>st</sup> Guardian     2<sup>nd</sup> Guardian    Mobile Number \_\_\_\_\_

Status of Parents     Married     Separated     Other

If separated, who has custody of the child (legal documents may be required)     Mother     Father

**Siblings (if any)**

Name	Grade	School	Academic Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have any siblings graduated/attended a SABIS® Network school?     Yes     No

If yes: SABIS® Network school \_\_\_\_\_ Year \_\_\_\_\_

Does your child suffer from any medical conditions?     Yes     No

Is your child on regular medication?     Yes     No

***Father or Mother Graduate of a SABIS® Network school***

Is the applicant's father a graduate of a SABIS® Network school?     Yes     No

If yes, what year? \_\_\_\_\_ Which SABIS® Network school? \_\_\_\_\_

Is the applicant's mother a graduate of a SABIS® Network school?     Yes     No

If yes, what year? \_\_\_\_\_ Which SABIS® Network School? \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_

How would you like to receive your copy of the SABIS® Newsletter?

Via Mail    Address \_\_\_\_\_

Via E-mail    Address \_\_\_\_\_

***Emergency Contacts Other than Parents***

In case of emergency, who would you like the school to contact?

Name 1 \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_

Name 2 \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_

I, the guardian, confirm all the above details to be correct.

Name \_\_\_\_\_ Signature \_\_\_\_\_

## *Required Documents*

- SABIS® Application Form
- Three passport-sized recent photographs
- Copy of birth certificate
- Copy of student passport and residence visa (Iqama) for non KSA nationals, or copy of the ID for KSA nationals
- Copy of parents' passports (father and mother) and the residence visa (Iqama) for non KSA nationals
- Sponsor's letter from the workplace
- Vaccination certificate
- SABIS® medical form
- Original End-of-year reports for the last three years. For students applying to Grade 1, only the original KG 2 report is needed.

*For applicants transferring from outside the Kingdom of Saudi Arabia, students should submit the last year report to be attested from the Ministry of Education, and KSA Cultural Attaché in the country of origin.*

*For applicants transferring from outside the city of Jeddah, but within the Kingdom of Saudi Arabia, students should submit a leaving certificate and the last year report attested from the Ministry of Education as well as a statement of financial clearance from the previous school.*

*For applicants transferring from another school in the city of Jeddah, students should only submit original reports from the last 3 years.*

- SABIS® Digital Platform waiver form.
- Bus registration form (if school transportation is required)

## **Additional Remarks**

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