



## Registration as a boarding student

**Regular** for the grade level \_\_\_\_\_ for the school year 20\_\_\_\_ / \_\_\_\_\_ Entrance date \_\_\_\_ . \_\_\_\_ .20 \_\_\_\_

**Euro** for the grade level \_\_\_\_\_ for the school year 20\_\_\_\_ / \_\_\_\_\_

**Guest** for the grade level \_\_\_\_\_ for the school year 20\_\_\_\_ / \_\_\_\_\_

for the period of      one school year      1st half-year (Aug-Jan)      2nd half-year (Feb-Jul)

(Individual period possible upon request)

Please fill in legible!

Last name(s): \_\_\_\_\_

First name(s): \_\_\_\_\_

Address: Street: \_\_\_\_\_

Zip code: \_\_\_\_\_ City: \_\_\_\_\_

Country: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Country: \_\_\_\_\_ Nationality: \_\_\_\_\_

Confession:      rc      Diocese: \_\_\_\_\_      Rel.-Instruction: \_\_\_\_\_  
                   prot.      others: \_\_\_\_\_      rc      prot.

Siblings:      Number: \_\_\_\_\_ , enrolled at the Kolleg at present \_\_\_\_\_

<b>Lichtbild</b>			
K.-Nr.:	_____		
Klasse:	_____	Gr.:	_____
Spr.-f.:	_____		

To be filled in by the Kolleg

## Information about student's present school and education

Type of school:      High-School      Grammar School      others: \_\_\_\_\_

Name of school: \_\_\_\_\_ Latest grade completed: \_\_\_\_\_

Zip code: \_\_\_\_\_ City: \_\_\_\_\_ Repeated grade(s): \_\_\_\_\_

Language lessons:	English _____ years	Latin _____ years	_____ years
	Spanish _____ years	Greek _____ years	Native language(s): _____
	French _____ years		

<p>Language/ Profile selection at Kolleg:</p>	<p>Grade 5-7</p> <p>English and Latin English and French</p>	<p>Profile subject from Grade 8</p> <p>Greek French Spanish Chinese Natural Science/Techn.</p>	<p>Special agreement: To be filled in by the Kolleg</p>
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**Parents or legal guardians****Other contact persons**

Relationship with pupil

	<b>Father</b>	<b>Mother</b>	
Last name:	_____	_____	_____
First name:	_____	_____	_____
Birth name:	_____	_____	_____
Occupation:	_____	_____	_____
Street:	_____	_____	_____
Street addition:	_____	_____	_____
Zip code:	_____	_____	_____
City:	_____	_____	_____
Country:	_____	_____	_____
Phone private:	_____	_____	_____
Phone business:	_____	_____	_____
Phone mobile:	_____	_____	_____
E-Mail address:	_____	_____	_____
Date of birth:	_____	_____	_____
Confession:	_____	_____	_____
Nationality:	_____	_____	_____
Legal guardian:			
Postal address:			
Billing address*: (*please specify only one)			

The parents are:      separated since \_\_\_\_\_ divorced since \_\_\_\_\_ are not married to each other

In case parent(s) are deceased:      Father on \_\_\_\_\_ Mother on \_\_\_\_\_

**Brief statement of your reasons for applying to Kolleg St. Blasien**

Please also submit copies of your birth and baptismal certificates as well as your last two report cards along with your application!

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

Signature of the legal guardian(s)