



Registration form Integrations-Vorklasse

_			passport photo
surname:			
name:			
sex: O female O male O dive	ers		
date of birth: pl	lace of birth:		
date of immigration:	accompanie	ed: O yes O no country	of origin:
religion:	mother tong	ue:	
current place of residence:			
street, house number:			
postal code:	place:		
telephone:			
e-mail:			
Parents (only if the applicant is n	ot yet of legal age)		
Mother:		Father:	
surname:		surname:	
name:		_ name:	
street, house number:		Street, house number	
postal code, place		postal code, place	
telephone		telephone	
e-mail:		e-mail:	

caretaker:				
surname:	name:			
agency:				
telephone:				
School/job career				
Completed school abroad		_ time		
confirmation O yes O no				
last attended school/class:				
school leaving qualification:				
5 .				
confirmation O yes O no				
vocational				
training:				
confirmation O yes O no				
command of German language:				
confirmation O yes O no				
command of English :				
confirmation O yes O no				
date:	_ signature:			
As part of the registration, the school can contact me as O email O postal O both	follows.			

Aufnahmegespräch O ja O nein Datum _____ Unterschrift Schulleitung _____