



# K12 ONLINE SCHOOLING ENROLLMENT FORM

**PURPOSE:** This form must be completed for any student applying to enroll into the Education World Wide USA International Private Educational Organization registered in the state of Florida Board of Education with the school code 4627. This form is required and designed to support a successful and positive transition in the admissions process and should be provided along with the student's enrollment and supporting documents.

<b>STUDENT INFORMATION:</b> Please provide all information in PRINT form			
<b>First name</b>			
<b>Preferred name</b>	*Only to provide a first name if the name used by the student differs from the first name in their passport.		
<b>Last name</b>			
<b>Enrolling for</b> <i>(anticipated grade level)</i>		<b>Student Date of Birth</b> <i>(D/M/Y)</i>	
<b>Gender</b>		<b>Place of Birth</b>	
<b>Nationality</b>	*Please indicate additional nationalities if applicable.		
<b>First (native) language</b>			
<b>Second language</b>	*Please indicate additional languages if applicable.		
<b>Anticipated start date</b>			

<b>PARENT/GUARDIAN INFORMATION:</b> Please provide all information in PRINT form			
<b>Address</b> <i>(Street, House / Flat No., City, State)</i>			
<b>Country</b>			
<b>Suburb</b>		<b>Postal Code</b>	
<b>Parent/Guardian name/s</b>			
<b>Relationship to student</b> <i>(mother; father; relative; guardian)</i>			
<b>Parent/Guardian Contact number/s</b>			
<b>Parent/Guardian Contact email/s</b>			



<b>TUITION FEE BILLING ADDRESS DETAILS:</b> Please provide all information in PRINT form			
<b>Payer name / Company name</b>			
<b>Address</b> <i>(Street, House / Flat No., City, State)</i>			
<b>Country</b>			
<b>Suburb</b>		<b>Postal Code</b>	
<b>Payer Contact number</b> <i>(Country Code Required)</i>			
<b>Payer Contact email</b>			
<b>Package</b>	<input type="checkbox"/> <b>Package 1</b>	<input type="checkbox"/> <b>Package 2</b>	<input type="checkbox"/> <b>Prime Package</b>
<b>Payment Plan</b>	<input type="checkbox"/> <b>Full Upfront Payment</b>	<input type="checkbox"/> <b>Flexible monthly payment</b>	
<b>Payment Method</b>	<input type="checkbox"/> <b>Bank Transfer (EUR)</b>	<input type="checkbox"/> <b>PayPal Service (USD)</b>	



## TRANSITION SUPPORTS / LEARNING SUPPORT INFORMATION

**Detail any support you think may be required for the student to make a successful and positive transition and any referrals that you may have made.**

Please answer the following questions listed below and provide any reports, individual education plans, or psycho-educational assessments to this form (if applicable). Disclosure of such information regarding the student's learning needs is a required part of the application process.

### English Proficiency

*Please use this section to describe the student's ability in the English language*

#### **Understanding**

Fluent       Good       Basic       None

#### **Speaking**

Fluent       Good       Basic       None

#### **Writing**

Fluent       Good       Basic       None

#### **Reading**

Fluent       Good       Basic       None

**How many years your child been instructed in and/or has studied in English?**

**What kind of English program and level of English was taught at the child's previous school?**

**Is English spoken or practiced at home?**

**Is English practiced / instructed / spoken outside of the school realm?**

**Has the child had any form of previous online / distance learning this past year (and/or in previous years)?**

**Please provide name and contact details of the student's previous school attended:**

**Is there any information that we should know about your child's approaches to learning? Do they have any learning disabilities or are there learning requirements that we should be aware of?**

**Is there any additional information that would be useful for our team to know that would help us best support them as a student at our school in an online learning environment?**



## REASON FOR ONLINE SCHOOLING (PLEASE TICK)

- Moving to a new location
- Seeking different educational opportunities
- Other, please specify:

## ACTION CHECKLIST (PLEASE TICK)

- Referrals made – correspondence either in the form of email and/or online consultation with admissions staff or support services
- Transition Supports / Learning support information – information about the student and any support/special requirements explained
- Enrollment Documents – previous academic transcripts, passport copy (or other form of valid ID) will be provided as part of the admissions documents

## STUDENT DECLARATION

- Please transfer my enrollment and reports for the purpose of Education World Wide K-12 Online Schooling.

*Note: Students aged under 18 may also wish to be recognized as a mature minor and complete this section. Mature students may wish to complete this section instead of their parents/guardians.*

Student's signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Parent/guardian signature\*: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_