



ALBANIAN INTERNATIONAL SCHOOL
TIRANA
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www.ais-tirana.org
Tel: +355 4 2273 488

School Registration Form

Section A

Student's Name: _____

Date of Birth: (MM/DD/YY) _____

Age: _____ Gender: Male Female

Nationality: _____

Parent/Guardian's Name: _____ Relationship: _____

Parent/Guardian's Name: _____ Relationship: _____

Family Address:

Mother's Phone Number: _____

Father's Phone Number: _____

Parent/Guardian's e-mail: _____

Emergency Contact Information:

Name: _____ Relationship: _____

Phone Number: _____

Sibling Name(s)	Date of Birth(MM/DD/YYYY)	School Attending
1) _____	_____	_____
2) _____	_____	_____



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Section B

Name and Address of Student's current school:

Telephone: _____ Current Teacher: _____

How did you hear about A.I.S?

Has a family member attended an Open House or visited the school?

No

Yes

Who? _____

The undersigned grants A.I.S community school permission to request and receive confidential information and teacher interviews regarding the student, and to retain such material in the student's file. In submitting an application, parents acknowledge that they understand and accept the admissions policy.

Parent/Guardian Signature: _____

Date: _____

Section C

1. Has your child had his/her eyes tested within the past year?

No

Yes, results: _____

2. Does your child wear glasses?

Yes

No



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3. Has your child had his/her hearing tested within the past year?

No Yes, results: _____

4. Does your child require preferential seating due to hearing or vision problems?

No Yes, explain: _____

5. Does your child have any medical condition of which we should be aware?

No Yes, explain: _____

6. Date of last physical examination: _____

7. Does your child have any asthma or allergies?

No Yes, explain: _____

8. Does your child carry an EPI-PEN?

No Yes, explain: _____

9. Does your child have any health or dietary restrictions?

No Yes, explain: _____

10. Has your child had any communicable disease such as chicken pox, mumps, etc?

No Yes, explain: _____

11. Does your child take any medication on a regular basis?

No. Yes, Specify, Dose, Frequency, Etc: _____

12. Has your child ever been subject to major disciplinary action (suspension, expulsion) in any school?

No Yes, please give details: _____



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13. What languages are spoken at home?

Primary: _____ Secondary: _____

14. If English is not the primary language, please indicate how many years of English study:
_____, and proficiency:

Fluent Good Basic None

15. Has your child ever had a psycho-educational assessment?

No Yes, a copy of the report is attached.

16. Has your child ever repeated a grade?

No Yes, explain: _____

17. Has your child been involved in any special education program?

No Yes, explain: _____

18. Is your child being tutored? If so why? Where?

No Yes, explain: _____

Tuition Fee and Acceptance

- I have deposited the first semester's tuition of _____ euro.
- I have deposited the whole amount of _____ euro.
- I have attached proof of my child's date of birth. (Notarized copy of birth certificate).
- I have attached a notarized copy of my child's passport.



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I understand that to complete the application, A.I.S will request my child's report cards and will request family interviews. A.I.S may also request communication with former school(s) where appropriate, a review of assessments, etc. I agree that A.I.S retains the right to complete discretion to accept or reject any application.

I, _____ Parent/Guardian of my child: _____

Hereby authorize the A.I.S administrators and staff to engage in the following:

- To have access to, and to make and receive copies of my child's academic records.
- To receive information about my child from current and/or previous schools.
- I also authorize my child's current and former schools to disclose information and/or documents to A.I.S.
- I consent to the collection, retention and disclosure of the above information for use by A.I.S for school purposes only.

I understand and agree to the items checked above.

Signature of Parent/Guardian _____

Date: _____

A.I.S is committed to protecting the privacy of the personal information of its applicants, registered families, and volunteers and staff.