

CJD Braunschweig
**International School Braunschweig –
 Wolfsburg**
 Helmstedter Straße 37

38126 Braunschweig

Date: _____

**Invitation to discuss admittance to the International School
 Braunschweig - Wolfsburg**

Dear parents, dear guardians
 before inviting you to an informal discussion about admittance to the International School
 Braunschweig – Wolfsburg, we need a few details about you and your child. Please complete the form
 below and return it to the school. We will then contact you to make an appointment with you and your
 child.
 It would be nice if you enclose any additional informations about your child, like reports, a photos etc.
 Thank you!

Child's information

surname
name
date of birth
denomination
present kindergarten/preschool or school
favoured date of admittance
first language
nationality
Siblings (name and age):
already attending CJD: <input type="radio"/> Yes <input type="radio"/> No

Parent or guardians's information

father's surname
father's name
phone: mobil:
mother's surname
mother's name
phone: mobil:
Address:

single parent: Yes No
 additional information enclosed: Yes No

Fill out by school:
 Date of discussion: _____ at _____