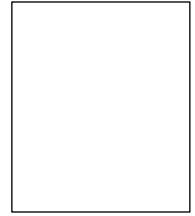




Victory Pioneers International Schools



Application Form

For Office Use Only

Parent ID:..... Student ID:..... New Admission Returning

Test Date:..... Test Administered by:

Admission Committee's / Principal's Recommendation:

Approved Approved Conditionally Not Approved

Parent Informed Yes No Date:..... Email Phone

Parents To Complete This Section

Student :

Last First Middle

Applying for Grade:..... Birth Date:

Month / Day / Year

Siblings

Attending/Applying: Name:..... Grade..... Attending..... /Applying.....

Name:..... Grade..... Attending..... /Applying.....

Name:..... Grade..... Attending..... /Applying.....

Father :

MR.

Last First Middle

Nationality:..... Religion :..... Languages Spoken:.....

Mother :

MRS.

Last First Middle

Nationality:..... Religion:..... Languages Spoken:.....

Mother's Mobile :..... Father's Mobile:.....

Mother's Work Phone:..... Father's Work Phone:.....

E-mail Address : Family Fax:.....

Home Number:.....

Area/Neighborhood/Compound Name:.....

Non-Saudis:

Family Sponsor: Father..... /Mother.....

Employer:.....

Last School System :
(Arabic , British , American , International)

Last Completed Grade :.....

Has your child ever applied to V.P.I.S. before ? Yes No
If yes when?.....

Has your child received any kind of special education services?

If yes , please specify :.....

Tutor Name :.....

Tutor Mobile No :.....

❖ PLEASE NOTE THAT V.P.I.S. HAS NO PROVISIONS FOR SPECIAL NEEDS EXCEPT TO SUPPORT STUDENTS WITH MILD LEARNING DIFFICULTIES

I, _____ verify that the information given above is correct and the school will be informed in writing regarding any changes to the following information.

Signature: _____

Date: _____