

Registration Form

Through this form, you can register your child/pupil at our school. If you encounter any issues or are unable to submit the registration, please contact the school using the contact details at the bottom of this page. To begin, we need the email address of a legal representative who will be the contact person for this registration. After submission, you will receive a confirmation of the registration at this email address. The invitation for the intake will also be sent here.

Your email address*

Student Information

Please fill in the details of your child/pupil below.

- **Last Name ***
- Middle Name(s)
- **Official First Names *** Enter all first names as they appear in the passport or on the ID card.
- Preferred Name
- **Gender *** Choose an option. If other, how should your child/pupil be addressed?
- **Date of Birth *** dd-mm-yyyy*
- **Place of Birth ***
- **Country of Birth ***
- **Nationality ***
- Second Nationality (optional) Only fill this in if the student has a second nationality.
- **Mother Tongue ***
- Additional Languages
- Date in the Netherlands Only for children/pupils from abroad. dd-mm-yyyy
- Citizen Service Number (BSN)
- **Street Name ***
- **House Number ***
- Select a Country...

- Select a Nationality...
- Select a Nationality...
- Addition
- **Postal Code ***
- **City ***
- Student's Email Address
- Student's Phone Number Enter the home phone number or mobile number here.
- **Start Date of Schooling in the Netherlands *** dd-mm-yyyy
- **Number of Months of Education in the Netherlands *** Enter the number of months here.
- Name of Previous (ISK) School + City Enter the previous situation here, even if the student has not yet attended school in the Netherlands.
- Number of Years of Education in the Country of Origin

Legal Representative Information

Please fill in the remaining details of the contact person (parent/guardian) who is completing this form.

- **Last Name ***
- Prefix(es)
- **First Name ***
- **Relationship to Student ***
- **Which language does the parent/guardian speak? ***
- **Street Name ***
- Registration Form
- **House Number ***
- Addition
- **Postal Code ***
- **City ***
- **Phone Number *** Enter the mobile number here. If no mobile number is available, enter the home phone number here.

- Email Address
- Additional Contact Person Enter an additional contact person here. Preferably with as much information as possible, such as name, relationship to the student, phone number, email address, and which language the person speaks.

General Information

- **Student's History ***
- **Living and Family Composition ***
- General Impression and/or Special Circumstances. Think of dyslexia/dyscalculia/sleeping/breakfast.
- Registration Form If there is a dyslexia or dyscalculia statement, we would like to receive it at n.vannorel@veluwseonderwijsgroep.nl.
- Medical Details and/or Medication Use.
- Can the student participate in sports?* Yes No
- **Name of General Practitioner ***
- **General Practitioner's Phone Number *** Enter the phone number here.

Health and Guidance

- Social-Emotional Well-being Does the student have (severe and/or long-term) social/emotional problems such as those resulting from traumatic experiences, ADHD, Autism, etc.?* Has the student received professional help for this? Does the student have special support needs in this regard?
 - Health Does the student have severe and/or long-term health problems?*
Has the student received professional help for this?
Does the student have special support needs in this regard?
 - Additional Guidance or Support Has the student previously received special guidance?*
- From whom did the student receive special guidance?
- Has an action plan been drawn up?
- If an action plan has been drawn up, we would like to receive a copy at n.vannorel@veluwseonderwijsgroep.nl. What additional help/support does the student need at our school?

Submit

This is the final step. After submitting the registration, you will receive a confirmation of the registration in your mailbox.

- The data from this form will be processed in the basic administration of the Veluwe Onderwijsgroep.
- Our privacy policy outlines the purposes for which we process the data in this form. Our privacy policy can be found on the Veluwe Onderwijsgroep website.
- We store the data in this form on a secure server for a maximum of five years after a student leaves.
- In connection with the Primary and Secondary Education Act, we inform you that after registration, data will be requested from the sending (primary) school.
- The school informs legal representatives about school matters and the student's results unless there is a court order stating that the right to information is restricted.
- A student is admitted for the duration of one school year, with tacit renewal unless the site management indicates in writing at least three months before the end of the school year that it is considering not extending the admission.

By agreeing below, you as the legal representative consent to the above conditions and digitally sign the form.*

This form has been truthfully completed by the parent(s)/guardian(s) with legal authority for this student.

- **Name of Legal Representative ***
 - **Place of Signing ***
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