

ADMISSION FORM INTERNATIONAL BACCALAUREATE DIPLOMA PROGRAMME 1

Please complete this form.

Stud	ont	Info	rma	tion

Surname(s)		
Given Name(s)		
First Name*		
Date of Birth		
Place of Birth		
Citizenship		
Gender		Female •
Mother Tongue(s)		
Permanent Street Add	dress**	,
Postal Code**		
Province**		
City**		
BSN-number***		
Registered by		Lenn Rosenkilde
Special educational ne (e.g. Dyslexia)	eeds	
*Name that will be use	d at sc	hool
**Within the Netherlan	ds (ca	n be added at a later date)
***BSN-number must	be pro	vided to be fully registered as a student (can be added at a later date)
Previous Academic R	ecord	5
Former Secondary Sci	hool	
Contact person		
Residential Situation		
Student lives with		
Family Composition		



Parent's / Guardian's Profile 1		
Role	Mother •	
Surname(s)		
Given Name(s)		
Date of Birth		
Place of Birth		
Citizenship		
Phone Number		
Email		
Occupation		
Parent's / Guardia	n's Profile 2	
Role	Mother •	
Surname(s)		
Given Name(s)		
Date of Birth		
Place of Birth		
Citizenship		
Phone Number		
Email		
Occupation		
	(three or four Higher Level subjects)	
Language (two diffe	rent languages must be chosen) Language A: English Language and Literature Standard Level	
Language 2:	Language ab initio Dutch	
*For Self Taught Land	guage, a meeting with the Career Counsellor is mandatory.	

Language 1:	Language A: English Language and Literature Standard Level
Language 2:	Language ab initio Dutch

Rest of the Subjects:

Psychology	Higher Level (no other option)
Design Technology	Standard Level (no other option)
Maths Application and Interpretation	Higher Level •
Visual Arts	Higher Level •

ا lliw I	provide:
[A copy of the photo page of the passport of the student
[A copy of the photo page of the passport of the parent(s)/guardian(s
1	A yearly fee of 1250 euros



☐ If applicable, admission vwo 5 or DP1.	
Signature of parent/guardian 1	Signature of parent/guardian 2
Date	Date