

Student Data Sheet

Student's information

Student's full name as on passport _____

Name student prefers to be called _____

Grade _____

Student's date of birth (day/month/year) _____

Nationality _____

Complete home address: _____

Home telephone number _____

Parents' information

Father's full name _____

Name father prefers to be called _____

Father speaks English (Please circle) YES NO

Father speaks Indonesian (Please circle) YES NO

Other spoken language/s _____

Father's phone number _____

Name of father's company _____

Father's work address _____

Father's office phone number _____

Father's email address _____

Mother's full name _____

Name mother prefers to be called _____

Mother speaks English (Please circle) YES NO

Mother speaks Indonesian (Please circle) YES NO

Other spoken language/s _____

Mother's phone number _____

Name of mother's company _____

Mother's work address _____

Mother's office phone number _____

Mother's email address _____

Mode of Transport to and from school (please circle)

NJIS School bus Private car (driver) Private car (parent driven)

Walk Others (please state): _____

Name of domestic helper if helper picks up student from school: _____

(Please attach a photo of the helper who will be picking up student from school)

Name of driver if driver picks up student from school: _____

(Please attach a photo of the driver who will be picking up student from school)

Person to call in case parent/guardian is unavailable:

Name: _____ Relation: _____

Phone number: _____

Address: _____

If you live in the Kelapa Gading area, would you be willing to house one or two children in the event of an emergency which precludes certain student from returning to their own homes? (Please circle)

YES

NO

For most trips, even those within Jakarta, notification prior to the trip and individual permission forms will be sent home.

Occasionally, the school organizes short walks or trips within the Kelapa Gading area,

(name of student) _____ has my permission to participate in neighborhood field trips within Kelapa Gading during the school year.

Parent's signature

Date

Please indicate below any medical concerns of which the school should be aware (for example allergies, medication, and so forth. This information is also required in the NJIS Health Form)

The above information is accurate to the best of my knowledge, and I will inform the school of any changes.

Parent's signature

Date