

Application form



Personalia Pupil

Family name	_____
First name(s)	_____
Given name	_____
Gender	M / F / X
Date of birth	_____
Place of birth	_____
Social security number	_____
Religion	_____
First nationality	_____
Second nationality	_____
Cultural background	_____
Date in The Netherlands (When born in another country)	_____
Country of origin caregiver 1	_____
Country of origin caregiver 2	_____

Educational history

Visits pre-school or daycare	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Name of pre-school or daycare	_____			
Do parents agree to request information from daycare	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Pre-school education	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Name of pre-school program	_____			

When registered at another school:

Name of school registered	_____
Place of school registered	_____
At school since (dd-mm-yy)	_____

Basisschool De Springschans

Eendracht 8, 1423 ET Uithoorn • 0297 - 52 33 97 • www.springschans.com • info@springschansuithoorn.nl

Personalia legal caregiver 1

Surname _____

Initials _____

First name _____

Gender M / F / X

Place of birth _____

Mobile number 1 _____

Mobile number 2 _____

Home address _____

Postal code _____

City _____

Secret YES ☐ NO ☐

E-mail _____

Signature _____

Date _____

Personalia legal caregiver 2

Surname _____

Initials _____

First name _____

Gender M / F / X

Place of birth _____

Mobile number 1 _____

Mobile number 2 _____

When different from legal caregiver 1:

Home address _____

Postal code _____

City _____

Secret YES ☐ NO ☐

E-mail _____

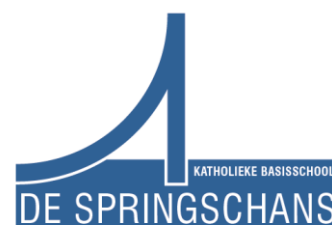
Signature _____

Date _____

Details:

Continuation application:

below are a number of questions which you are not obliged to answer, but which can be of value for us



Siblings at De Springschans

SOS contact person

Name (and relation to pupil)

Mobile number

Name (and relation to pupil)

Mobile number

Medical information

Doctor (GP)

Address doctor (GP)

City doctor (GP)

Allergic to / forbidden products

Medication

Development

The 'Wet Passend Onderwijs' (Adequate Education Act) obliges schools to offer adequate and appropriate schooling for children with special needs either by offering it themselves, or by ensuring the child is offered appropriate schooling elsewhere. To assess whether De Springschans can offer the appropriate schooling for your child, we would like to ask you to answer some questions below. These questions concern the development of your child from birth to the moment of registration.

Might your child develop in a certain way in the period between this registration and the start at De Springschans and this is important for school to know, we would like to hear from you.

The physical development of our child differs from the development of other children in our area.

YES ☐ NO ☐

The speech/language skills of our child differ from the development of other children in our area.

YES ☐ NO ☐

The gross/fine motor skills of our child differ from the skills of other children in our area.

YES ☐ NO ☐

The general behavior (at home and in other situations) of our child differs from the behavior of children in our area.

YES ☐ NO ☐

Our child's eyesight is fine.

YES ☐ NO ☐

Our child's hearing is fine.

YES ☐ NO ☐

Our child is sick more often than children in our area.

YES ☐ NO ☐

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Our child is (has been) treated by:

Speech therapist ☐
Child/Youth Care ☐
Pediatrician ☐
Physiotherapist ☐

Different, _____

Details:

The above information will be treated confidentially as defined in the Informatiebeveiligings- en Privacy Beleid (IPB) (information security and privacy policy) of Stichting Wijzer aan de Amstel:
https://www.wijzeraandeamstel.nl/assets/uploads/files/Beleid_IPB_Wijzer_ad_Amstel_corr.pdf

Please return this form by mail or email to:

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