

## Application for Enrolment

**Kindergarten**

**Primary School (up to Year 4)**

**Orientation Phase (Year 5)**

**Secondary I**

**Secondary I (O-Level certificate)**

**Upper Secondary (A-Level certificate)**

Proposed enrolment date \_\_\_\_\_

### 1. Student's Details

Surname: \_\_\_\_\_  
(as on passport)

Given name(s): \_\_\_\_\_ Preferred name: \_\_\_\_\_  
(as on passport)

male:

female:

Date of birth: \_\_\_\_\_ Place of birth/country: \_\_\_\_\_

All Nationality(ies): \_\_\_\_\_ Religion: \_\_\_\_\_

Malaysian nationality? Yes No

Reside in Malaysia since/from: \_\_\_\_\_

Address in Malaysia:

\_\_\_\_\_

\_\_\_\_\_

Phone number: \_\_\_\_\_ Mobile: \_\_\_\_\_

Student's E-Mail: \_\_\_\_\_

Mother tongue: \_\_\_\_\_ Family language: \_\_\_\_\_

Additional language(s): \_\_\_\_\_

Chronic diseases/Allergies: \_\_\_\_\_

Medication required on regular basis                                      Yes            No

If yes, please indicate:

\_\_\_\_\_

Dyslexia\*    Yes            No

AD(H)S\*    Yes            No

Language learning ability disorder \*    Yes            No

Developmental disorder\*    Yes            No

\*Please attach copy of assessment

Additional disorders (e.g. motor skills / ergo therapeutic / speech therapy):

\_\_\_\_\_

\_\_\_\_\_

## 2. Details on previous Kindergarten Attendance

Has your child previously attended any nursery?                                      Yes            No

If yes, name of institution: \_\_\_\_\_

Has your child previously attended any Kindergarten?                                      Yes            No

If yes, name of institution: \_\_\_\_\_

from \_\_\_\_\_ to \_\_\_\_\_

Language:

German

English

Other: \_\_\_\_\_

## 3. Details on School Attendance

Registration for Class: \_\_\_\_\_ Current Class: \_\_\_\_\_

Current school: \_\_\_\_\_

State: \_\_\_\_\_

Type of school: \_\_\_\_\_

Expected attendance period at DSKL : \_\_\_\_\_

**School career:**

First school enrolment on (Date): \_\_\_\_\_

- Regular enrolment  
 Enrolment upon application  
 Deferment\*

\* Please state reason: \_\_\_\_\_  
 \_\_\_\_\_

Transition from Primary School after Year 4: Recommendation and/or met transition requirements for:

Secondary I (Year 6 – 9)                      Secondary I (Year 10)                      Secondary II

Transition from Orientation Phase (Year 5) and/or from 6 years of Primary School after Year 5 or 6:  
 Recommendation and/or fulfilled transition requirements for:

Secondary I (Year 6 – 9)                      Secondary I (Year 10)                      Secondary II

Transition from the Integrated Comprehensive School after Years 5 to 10 – Leaving recommendation for:

Secondary I (Year 6 – 9)                      Secondary I (Year 10)                      Secondary II

**Previously attended school(s) after Year 1:**

Name of school	Country/State	From - to	Year

1. Foreign language: \_\_\_\_\_ Since Year: \_\_\_\_\_  
 2. Foreign language: \_\_\_\_\_ Since Year: \_\_\_\_\_  
 3. Foreign language: \_\_\_\_\_ Since Year: \_\_\_\_\_

**Upon change of school at secondary level:**

The previously attended school applies the

- G8-System (12-year System)  
 G9-System (13-year System)

#### 4. E-Mail address for Communication between the Family and DSKL

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#### 5. Details on Parents (Guardian)

If one parent is not the legal guardian, this information is to be added under section 7.

##### Guardian (Father)

If the guardian is not the biological father of the child, please attach written proof of custody.

Surname, first name: \_\_\_\_\_

Custody: \_\_\_\_\_ sole \_\_\_\_\_ joint \_\_\_\_\_

Profession: \_\_\_\_\_

Company (Name, Address, E-Mail): \_\_\_\_\_

\_\_\_\_\_

E-Mail private: \_\_\_\_\_ Mobile private: \_\_\_\_\_

Nationality(ies): \_\_\_\_\_ Mother tongue: \_\_\_\_\_

If German is not his mother tongue, is he proficient in the German language? Yes No

##### Guardian (Mother)

If the guardian is not the biological mother of the child, please attach written proof of custody.

Surname, first name: \_\_\_\_\_

Custody: \_\_\_\_\_ sole \_\_\_\_\_ joint \_\_\_\_\_

Profession: \_\_\_\_\_

Company (Name, Address, E-Mail): \_\_\_\_\_

\_\_\_\_\_

E-Mail private: \_\_\_\_\_ Mobile private: \_\_\_\_\_

Nationality(ies): \_\_\_\_\_ Mother tongue: \_\_\_\_\_

If German is not her mother tongue, is she proficient in the German language? Yes No

### Guardian (Other)

Surname, First name: \_\_\_\_\_

Custody: \_\_\_\_\_ sole \_\_\_\_\_ joint

Profession: \_\_\_\_\_

Company (Name, Address, E-Mail): \_\_\_\_\_

\_\_\_\_\_

E-Mail private: \_\_\_\_\_ Mobile private: \_\_\_\_\_

Nationality(ies): \_\_\_\_\_ Mother tongue: \_\_\_\_\_

If German is not her/his mother tongue, is she/he proficient in the German language? Yes No

### 6. Emergency Contact in Malaysia

Surname, First name: \_\_\_\_\_ Language: \_\_\_\_\_

Phone private: \_\_\_\_\_ Mobile private: \_\_\_\_\_

### 7. Additional Contact Person

Surname, First name: \_\_\_\_\_

Relationship to child (e.g. Aunt): \_\_\_\_\_

Address private: \_\_\_\_\_

\_\_\_\_\_

Phone private: \_\_\_\_\_ Mobile private: \_\_\_\_\_

### 8. Additional Information regarding the Child

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 9. Information for Emergencies

Which hospital should your child be admitted to in case of an emergency?

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Blood type of the child (if known): \_\_\_\_\_

Vaccination according to vaccination record available:                      Yes                      No

Paracetamol, Ibuprofen/Anthihistaminica may be given in case of emergency, f.e. during class trips:

Yes                      No

Risk factors (e.g. drug intolerance, diabetes, allergies, etc.):

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### Declaration of Consent:

- I hereby agree that in the event of an emergency, my child will be taken to the above mentioned hospital by taxi or private vehicle accompanied by a teacher. In special cases, the nearest hospital may be approached.
- The attending physician shall be free to decide on any necessary treatments, such as medication, injections, vaccinations.
- I undertake to present the current copy of my child's visa.
- I acknowledge the terms of payment and the rules and regulations of the German School as well as the statutes of the German School Association Kuala Lumpur, in particular that the non-refundable registration fee is due after registration.
- I agree that my child participates in all domestic excursions and field trips.
- I am aware that the school shall assume no responsibility or liability beyond the accident and liability insurance. This shall particularly apply to the loss or damage of personal property. The school or the coordinator of an extracurricular activity shall not be liable for any accident, injury or illness of persons involved.
- I herewith confirm that our family is covered by a health and accident insurance plan.
- I agree to the recording and publication of my address and telephone number among the school community.
- I hereby agree that images of my child, if necessary including his/her name on class photos and photos of activities of DSKL may be published in relevant pages of the Internet for documentation and public relations purposes (e.g. website, social media, yearbook and publications of the sponsoring in-ststitutions such as ZfA [Central Agency for German Schools Abroad], BVA [German Federal Ad-ministration Office]).

**Attachments must include the following Documents:**

- Completed application form for membership of the German School Association (DSM)
- Completed bus registration form if the school bus service is being used
- Copy of the student's passport and visa (visa copies are to be submitted after school admission)
- Copy of the parents' passport
- Copies of current certificates including certificate of promotion to the higher level  
If school change occurs during current year: report card of the school the child leaves
- School career recommendation letter (refer to section 3)
- For students aiming to pass the DSKL A-Level examination: evidence (certificates) of the school year in which the acquisition or completion of a foreign language began or ended (copy or certificates stating foreign languages)  
If applicable, proof of custody (if one / both guardians are not the biological parents)
- Copy of vaccination certificate
- Digital passport size photo

**The burden of proof regarding completeness of the registration documents lies with the parents!**

**The child can be considered in the allocation of vacant places only upon complete submission of the required registration documents stated above. Otherwise the application may not be processed.**

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Place, Date

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Signature of Guardian