

**APPLICATION FOR ENROLLMENT
TO PROMAR ENGLISH KINDERGARTEN
35-112 Rzeszów, ul. Bohaterów 12**

Please, enroll my daughter/son/ward* for the PROMAR English
Kindergarten in Rzeszów in the school year **2024/2025**

Child's name (names) and surname.....

.....
(Date and Parents' /Guardians' legible signatures)

KINDERGARTEN PRINCIPAL'S RESOLUTION

Kindergarten Principal on (date).....

admits / does not admit

.....
(child's name and surname)

as of to the PROMAR English Kindergarten in Rzeszów to the
group of:

3-YEAR-OLDS

4-YEAR-OLDS

5-YEAR-OLDS

6-YEAR-OLDS

.....
(Kindergarten Principal's signature)

Rzeszów,

I. CHILD'S DATA

1. Child's name (names) and surname

2. Date of birth:..... Nationality:

3. Place of birth (city, country)

4. Voivodeship (region):.....

5. Registered address:

6. Address of residence:

countryside city up to 5k inhabitants city of more than 5k inhabitants

7. Correspondence address:

8. CHILD'S PERSONAL IDENTIFICATION NUMBER

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9. Child belongs to the catchment area:

.....
(school address)

10. Name and address of the preschool which the child currently attends:

.....

11. Child's native language

12. Language spoken at home

13. Has the child learnt English?

Yes How many years No

II. PARENTS' OR GUARDIANS'* DATA

Data	Mother/Guardian*	Father/Guardian*
Name and surname		
Nationality		
Address of residence		
E-mail		
Workplace		
Telephone contact number I		
Telephone contact number II		

PERSON ENTITLED TO BE CONTACTED

(in case of inability to contact Parents in an urgent situation)

NAME AND SURNAME.....

E-MAIL..... TELEPHONE NUMBER.....

In case of any changes in the above data, please contact the school office without undue delay.

III. ADDITIONAL INFORMATION ABOUT THE CHILD

1. Siblings (names and dates of birth)

- 1.
- 2.
- 3.

2. Family: two-parent/single-parent *

3. Which of the following statements describes your child best?(indicate)

- curious about new situations, trustful, adapts quickly
- likes being in the centre of attention, likes being a leader of a group
- an individualist, prefers playing alone rather than in a group
- not very active, shy, insecure
- noisy, active, does not always obey orders given by adults
- is sometimes provocative to others, gets angry when things don't go to his or her liking
- weepy, strongly attached to his or her parents, hesitant
- different description.....

4. Past medical history, epilepsy, malformations

.....
.....

5. Food allergies and possible symptoms

.....
.....

6. Airborne allergies and possible symptoms

.....
.....

7. Is the child reluctant to eat certain types of food? (enumerate)

.....
.....

8. Child's favourite diminutive form of his/her name by which he/she should be addressed

.....

9. Child's favourite forms of spending his/her free time (Child's favourite games and activities)

.....
.....

10. What self-service activities can the child do independently? (indicate)

- Getting dressed and undressed
- Tying shoes
- Eating
- Personal hygiene (e.g. washing hands and face, cleaning teeth)
- Other:

11. Has the Child undergone potty training?

Yes No

12. Extra-curricular activities: Indicate up to two types of extra-curricular classes (different than those in the offer of the PROMAR English Kindergarten) which you might be interested in (the groups of 4-year-olds and 5-year-olds):

A:
B:

13. Are you getting any messages regarding behaviour or developmental issues, having negative impact on the Child?

Yes No

If yes, what? (enumerate):

.....
.....

14. Is the Child followed in a specialist clinic?

Yes No

If yes, which?:

If yes, any documentation and records, including any medical and psychological certificates and diagnoses conducted in the previous kindergarten, shall be submitted as an attachment hereto, as it allows for appropriate assessment whether the Kindergarten is able to provide

sufficient help in terms of special educational needs (which are offered by the Kindergarten to the minimum extent necessary) and shall be helpful in terms of further work with the child and facilitating his or her development.

15. Does the child have any certificate of disability, certificate of special educational needs, evaluation report from a school psychology clinic (Psychological and Pedagogical Counselling Centre), other certificates?

.....
.....

In case of any changes to the above data, inform the school office without undue delay.

IV. COOPERATION BETWEEN PARENTS AND THE KINDERGARTEN

1. What form of cooperation could you offer within the framework of cooperation with the Kindergarten? (indicate)
- participation in Pupils' Parents Association
 - participation in field trips, helping with taking care of children
 - help with organizing trips
 - help with preparing events and celebrations (e.g. family picnic)
 - participation in classes e.g. in a form of a presentation about your job, hobbies etc.
 - giving suggestions and propositions regarding the organization of interesting meetings and activities
 - other propositions

.....

V. DECLARATION OF AUTHORISATION TO USE CHILD'S PERSONAL IMAGE AND LIKENESS

I hereby grant/do not grant* to the PROMAR English Kindergarten the right to use the Child's personal image and likeness for trade and/or advertising purposes of the PROMAR English Kindergarten in press and the Internet.

.....
Date and Parents' (Guardians') legible signatures

** delete as appropriate*

VI. PERSONAL DATA PROTECTION STATEMENT

In accordance with Article 6(1)(a) and Article 9(1)(a) RODO (GDPR), I declare that I consent to the processing of my personal data and my child's data contained in the "Application for enrolment to the PROMAR English-speaking Kindergarten" in order to implement the processes necessary for the organization of work, and functioning of the facility".

.....
Date and child's parents (legal guardians) legible signatures

Information that contains child and their parents personal data was collected as regards the immediate contact in case of emergency situation and to learn more about the child's family situation, as well as to adapt working forms and methods. They are available only for the teachers of our school, who are entitled to process the child's and their family personal data and are bound by professional discretion.

VII. DECLARATION OF ENTITLING OTHER PERSONS TO PICK UP AND BRING THE CHILD TO THE KINDERGARTEN (only persons of age (adults) can be entitled)

Being fully and personally liable, I hereby declare that the legal rules and regulations regarding the duty of care of underage children (the Act of 01.02.1983) „Traffic Law Act” (Section 2, Title I, Article 36 point 1 and Article 163 sec. 1, art. 187 sec. 1 and 2 of the Penal Code) are known to me.

I, the holder of the ID card series and number:
(Parent’s name and surname)

..... hereby entitle the following persons to pick up and bring my Child to the Kindergarten:

1
(surname and name - kinship, ID card series and number, telephone number)

2
(surname and name - kinship, ID card series and number, telephone number)

3
(surname and name - kinship, ID card series and number, telephone number)

4
(surname and name - kinship, ID card series and number, telephone number)

5
(surname and name - kinship, ID card series and number, telephone number)

.....
Date and Parents’ (Guardians’) legible signatures

I hereby attest and agree that I have read and understood the terms and conditions of enrollment and admission for the school year 2019/2020.

.....
Date and Parents’s (Guardians’) legible signatures

The information on Child’s and his or her family are collected in order to contact the Parents (Guardians) in case of urgent situations as well as getting acquainted with Child’s family situation and adjusting work forms and methods. The data is disclosed only to the teachers who are entitled to process Child’s and his or her family data and obliged to keep it confidential.

** delete as appropriate*

ATTACHMENTS AND ENCLOSURES HERETO:

- a) Birth certificate available for inspection,
- b) A document confirming Child’s registered address and his or her address of residence e.g. Parent’s ID card available for inspection,
- c) Opinion or evaluation report from a school psychology clinic (Psychological and Pedagogical Counselling Centre), if the Child has such.

***applies to citizens of EU member countries:**

1. Residence address in Poland:

.....

2. Permanent address abroad:

.....

3. Personal identification number:

.....

4. Occupation, post in a company, employer contact details:

.....

****applies to citizens of countries outside of EU:**

1. Residence address in Poland:

.....

2. Permanent address abroad:

.....

3. Personal identification number:

.....

4. Occupatio, post in a company, employer contact details:

.....

5. Bank account numer (operated by a foreign bank):

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