



The Children's Garden - Jumeira

Languages: French Arabic

Date

APPLICANT INFORMATION

Family name		First name	Middle name(s)
Male/female	Date of birth (dd/mm/yyyy)	Place of birth (country)	
Religion		Nationality (as in passport with residence visa)	
First language	Second language	Language(s) spoken at home	

FAMILY INFORMATION

Father/Male Guardian

Title	Family name	First name
Nationality as in passport	Business/employer	Profession/occupation
Employer/work address		
Office tel no	Office fax no	Mobile no
Email		
Permanent home address (city, house number, street name)		
PO Box	Area/district (i.e. Jumeira, Umm Suqeim)	Home tel no

Mother/Female Guardian

Title	Family name	First name
Nationality as in passport	Business/employer	Profession/occupation
Employer/work address		
Office tel no	Office fax no	Mobile no
Email		
Permanent home address (city, house number, street name)		
PO Box	Area/district (i.e. Jumeira, Umm Suqeim)	Home tel no

Emergency contact person and relationship with family	Emergency contact no
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REQUESTED GRADE LEVEL AND DATE OF ENTRY

Last grade level attended	Entry grade level requested	Last day attended school	Entry date requested
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PREVIOUS SCHOOL RECORD

Please provide information on previous schools attended (starting with the most recent school)

Name of school		Country	Curriculum
Entry date	Exit date	Grade level(s) completed	
Name of school		Country	Curriculum
Entry date	Exit date	Grade level(s) completed	

LEARNING OR BEHAVIOUR SUPPORT

Has your child received any kind of learning or behaviour support and/or experienced any learning difficulties? Yes No
 If so, please provide details below (i.e. speech therapy, duration etc.) and provide copies of reports from the therapist if available.

SPECIAL INTERESTS/TALENTS

Please list any special interests/talents your child has.

SIBLINGS: CURRENT SCHOOL RECORD

Name	Date of birth	Name of country and grade level of current school/university
Name	Date of birth	Name of country and grade level of current school/university
Name	Date of birth	Name of country and grade level of current school/university

How did you hear about us? Web Newspaper/magazine Radio Friends Word of mouth

Other

FEE PAYMENT

Fees paid by (please tick): Company Privately

Other



MEDICAL RECORD

Name and contact number of family doctor

Please tick and provide date if your child has had any of the following illnesses/conditions:

Condition	Date	Condition	Date
1. Chicken pox		1. Allergies (please specify)	
2. Frequent colds		2. Asthma	
3. Frequent ear infections		3. Concentration difficulties	
4. German measles (rubella)		4. Diabetes	
5. Measles (rubeola)		5. Epilepsy	
6. Mumps		6. Fainting	
7. Pneumonia		7. Hearing difficulties	
8. Poliomyelitis		8. Heart trouble	
9. Rheumatic fever		9. Operations	
10. Scarlet fever		10. Serious injuries	
11. Tonsilitis		11. Speech difficulties	
12. Tuberculosis		12. Thalassaemia	
13. Whooping cough		13. Vision difficulties	

Is your child currently physically challenged in any way or under medical or psychological supervision? Yes No
 If yes, please provide details.

Is your child taking medication now or periodically? Yes No
 If yes, please provide details.

Is there any reason for your child to have restricted physical activity? Yes No
 If yes, please provide details.

THE CHILDREN'S GARDEN - TERMS AND CONDITIONS: ADMISSION, SCHOOL FEES, TUITION REFUND, INDEMNITY AND PHOTOGRAPHY



ADMISSION

This signed Application Form does not oblige The Children's Garden (TCG) to accept your child. However, once you have been notified of your child's placement decision and the Registration and relevant term fees have been paid, a contract is deemed to exist between TCG and the parents/guardians, provided that TCG's regulations are observed. TCG reserves the right to place your child in the year level deemed to be most appropriate, within the bounds of UAE law.

SCHOOL FEES

1. The non-refundable Application Fee of AED 500 is required to process your child's application.
2. The Registration Fee of AED 2,000 is payable once you have been notified of your child's placement.
3. In order to register/re-register your child for the new academic year, you are required to pay the Term One Fee and the Registration/Re-registration Fee* according to TCG policy.
4. A student may not start the academic year unless the Term One Fee has been paid in full.
5. TCG reserves the right to withhold the end of year report until all outstanding fees have been paid in full.
6. Re-registration will not be accepted unless all outstanding fees have been paid in full, including a Re-registration Fee of AED 2,000.
7. School fees are subject to change in accordance with approval from the Ministry of Social Affairs.
When planning for your child's education, parents are advised to allow for future adjustments in the fee structure.
*The Registration/Re-registration Fee will be deducted from the Term Two Fee on completion of a full academic year.

TUITION REFUND

Notice of student withdrawal and application for a tuition refund at the request of the parent/guardian must be made in writing to the school Director.

- I. Student withdrawal prior to the start of the academic year
 1. If the request for withdrawal of a student is initiated by the parent/guardian, the paid Term One Fee is refunded. The AED 500 Application Fee and the AED 2,000 Registration/Re-registration Fee are non-refundable.
 2. If the request for withdrawal of a student is initiated by TCG, the paid Term One Fee and the Registration/Re-registration Fee are refunded. The AED 500 Application Fee is non-refundable.
- II. Student withdrawal during the school term
 1. Fees will be charged for **one full month** if a student attends TCG for two weeks or less.
 2. Fees will be charged for **two full months** if a student attends TCG for more than two weeks and less than one month.
 3. Fees will be charged for **the entire school term** if a student attends TCG for one month or more.

The school holds no responsibility if official documents are not submitted by parents to the Registrar's office on time.

INDEMNITY

I agree to my child participating in any educational activities arranged by TCG. This includes any field trips. In the event of injury to my child or damage to the property of my child while he or she is participating in such activities, or while on TCG's premises or being transported to or from the school, I will not hold the school or any member of the school staff responsible. The school undertakes, in the event of an emergency, to make every effort to contact the parents. If this is not possible the child will be taken either to his/her family doctor, or to a suitable hospital for treatment.

PHOTOGRAPHY

I give permission for photographs of my child to be taken for marketing purposes. Yes No

DECLARATION

I, parent/guardian of hereby declare that I have read the above policies and agree to abide by them. I declare that all information provided in the Application Form is true, correct and complete and has been offered freely. Furthermore, I hereby authorise the transfer of this information to The Children's Garden's electronic database.

Name	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please return the completed Application Form, plus the AED 500 Application Fee to TCG Jumeira.

Please make the cheques payable to:
The Children's Garden
Tel.: +971 (0) 4 349 2985
www.tcgjumeira.ae