



## Enrolment Application Form

Please fill this form out and return via email to [info@copperfield.education](mailto:info@copperfield.education).

Student first name(s) as stated on official passport: \_\_\_\_\_

Student surname as stated on official passport: \_\_\_\_\_

Gender: \_\_\_\_\_

Date of birth (Year/Month/Day) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Place of birth: \_\_\_\_\_

If Swiss citizen, Heimattort: \_\_\_\_\_

Nationality: \_\_\_\_\_

Languages and indicative fluency 1-5 where 5 is the highest:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sibling #1 name and age:

\_\_\_\_\_

Sibling #2 name and age:

\_\_\_\_\_

Term of entry: August / January / April

The student wishes to attend Copperfield as a: Day Student  Boarding Student

Previously attended schools: name, country, dates (MM.YY)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of first legal guardian: \_\_\_\_\_

First legal guardian's relation to student: \_\_\_\_\_

First legal guardian's contact details: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of second legal guardian: \_\_\_\_\_

Second legal guardian's contact details: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If

the child has a third legal guardian or parent, please indicate here: \_\_\_\_\_

Special educational needs such as dyslexia, dyscalculia (specify or enter "N/A" if inapplicable")

Has the student ever been expelled from a school? (specify or enter "N/A" if inapplicable")

Please upload/attach school report cards of the last 12 months.

Please enclose/attach an image of the student's passport. (or passports)

You agree and confirm that:

-All information requested on this form has been given truthfully;  
-All parents and legal guardians are aware of this application and enrolment at this time;  
-You accept the School Rules, the School Enrolment Regulations as listed on copperfield.education/enrolment, and all further policies and regulations of the school; -You have procured for the student Health and Accident Insurance, and Private Liability Insurance; -You give your consent, that relevant information about the student will be shared with relevant staff at school in order to ensure best possible support and care

Date and place

Signature First Legal Guardian \_\_\_\_\_

Signature Second Legal Guardian \_\_\_\_\_



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