

CJD Braunschweig  
 International School  
 Braunschweig – Wolfsburg  
 Helmstedter Straße 37  
 D-38126 Braunschweig



**Invitation to discuss admittance to the International School  
 Braunschweig – Wolfsburg**

Date:

Dear Parents,

Dear Guardian,

We are very pleased that you are interested in the International School Braunschweig-Wolfsburg. Prior to our first meeting we would greatly appreciate having the following information regarding you and your child. Please provide us with your child's birth certificate, previous report cards and a photo. Please complete the form below, attach all relevant documents and return them to our office. After we have received your information we will contact you personally and arrange an appointment.

Thank you!

**Child information**

Child`s Surname
Child`s First Name
Date of Birth
Name and current year of present kindergarten/pre-school/school
Date of enrolment
First language
Nationality
Siblings (name and age):
Attending CJD:      Yes      No

**Family information**

Father`s Surname
Father`s First Name
Telephone: Mobile phone:
Mother`s Surname
Mother`s First Name
Telephone: Mobile phone:
Address:
Email-Address:
Single parent:                      Yes                      No
Documents enclosed:              Yes                      No
<b>For school use only:</b>
Date fixed on:                      at: