



REPUBLIC OF CYPRUS
MINISTRY OF EDUCATION
SPORT AND YOUTH

DEPARTMENT
OF PRIMARY EDUCATION

**APPLICATION FOR REGISTRATION IN PRIMARY OR PRE-PRIMARY SCHOOL
(COMPULSORY PRE-PRIMARY EDUCATION AND PRE-PRIMARY CLASS)**

(Please submit along with an official birth certificate as well as refuse and electricity bills.)

PART A - Please complete ALL data below:

1. Child's name and surname:
 2. Date of birth:/...../..... Place of birth:
 3. Home address: Postal code:
Area: Telephone No. (home):
 4. School and class **s/he currently attends/has attended until now** (underline accordingly):
Primary School/Pre-Primary School: Class:
 5. School and class **for which registration is requested during the school year**:
Primary School/Pre-Primary School: Class:
 6. Father's full name: Telephone No. (mobile):
Email:
Occupation: Telephone No. (work):
Place of work: Birthplace:
 7. Mother's full name: Telephone No. (mobile):
Email:
Occupation: Telephone No. (work):
Place of work: Birthplace:
 8. Refugee family: YES NO Refugee card number:
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PART B - In case the child is a Cypriot citizen, please complete the following:

9. Greek Cypriot Turkish Cypriot Maronite Armenian Latin
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PART C - In case Greek is NOT the child's mother tongue, please complete the following:

10. Child's knowledge of the Greek language: Very good Good Fair Poor
 11. Passport number: (Please attach certified copy.)
 12. Country of origin:
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PART D - Please complete the following:

13. Child with Special Needs:

a) Approved by the District Special Education Committee (DSEC) for providing:

Special Education Speech Therapy Care Assistant

b) Under examination by the DSEC: YES NO

c) Diagnosed but who has not been referred to the DSEC.

} (Please attach the relevant documents.)

14. Are there any particular issues relating to the child (e.g., health issues), about which the school should be informed? YES NO If YES, please explain further:

.....
.....

PART E - In case the parents are divorced or separated, please circle (a) or (b) or (c) and complete/ underline what applies to your case:

(a) Parental care is exercised jointly by both parents while the custody and care of the child has been assigned to the **father / mother** (underline as necessary). **The child's attendance to a particular school is not determined by a Court Order.**

Father's signature indicating agreement with this application:

Mother's signature indicating agreement with this application:

(Signature of both parents is required.)

(b) Parental care is exercised jointly by both parents while the custody and care of the child has been assigned to the **father / mother** (underline as necessary). **The child's attendance to a particular school has been decided by the family court (please attach the relevant Court Order).**

(c) Parental care of the child has been assigned exclusively to the **father / mother / other person** (underline as necessary and attach the relevant Court Order).

<p>Name and surname of parent/guardian who completed the application:</p> <p>Signature:</p> <p>Date:/...../.....</p>

WARNING: False statements will lead to prosecution for deception of the Authorities and cancelation of any potential approval of the application.