ENROLMENT FORM

SCHOOL YEAR 2025-2026



TO BE FIL	LED OUT	T BY SCH	1001.0	FFICE
I O DE I II			ICCL C	I I I VE

Registration number

Request for additional information sent	Yes	No	
Processed by			

BESIDES THIS FORM YOU HAVE TO BRING:

- Valid proof of identity of the parents or guardianship certificate.
- Personal record sheet of the municipality or GBA* extract + BSN number.
- Valid proof of identity of the student.

STUDENT DETAILS

Gender	Student email address
First name by which one is known	Place of birth
First names	Municipality
Prefix(es)	Country of birth
Last name	Nationality
BSN (citizen service number)	2nd nationality
Date of birth	
Postal code	FOR THOSE OF NON-DUTCH ORIGIN:
Street	Has lived in the Netherlands since
House number	
Addition	PREVIOUS EDUCATION:
Town	Primary school
Municipality	School for second education
Postal address, if any	Name of school
Country	Address
Mobile number	Postal code/Town
MEDICAL DETAILS	
Name of General Practitioner	Postal code + place of residence

Telephone

S	reet + house	number

DETAILS OF PARENT(S)/CAREGIVER(S) (OR OTHER LEGAL REPRESENTATITVE(S)

DETAILS OF FATHER/CAREGIVER	DETAILS OF MOTHER/CAREGIVER
Initial(s)	Initial(s)
Prefix(es)	Prefix(es)
Last name	Last name
Form of address	Form of address
Street	Street
House number	House number
Addition	Addition
Postal code	Postal code
Place of residence	Place of residence
Municipality	Municipality
Country	Country
Country of birth	Country of birth
Nationality	Nationality
Mobile number	Mobile number
Email address	Email address
Want to receive messages Yes	o Want to receive messages Yes No

DETAILS OF PARENT(S)/CA	REGIVER(S) (OR OTHE	R LEGAL	REPRESENT	ATIVE(S))		
Parents divorce?	Yes	No				
If yes, student lives with	mother	father	o	ther		
Parental authority?	father and mother		father	mother	other	

ENROLMENT
Curio isk Bergen op Zoom
Curio isk Breda

We allow Curio isk to ask for and share important information with the old school or other helpers. This is for the student's admission or support.

Yes No

Date

Town

Signature of parent/caregiver*

Signature of parent/caregiver*

Details of student will be processed in accordance with the Personal Data Protection Act.