



SEA Registration Form – 2021
Please complete this form in **BLOCK LETTERS**.

STUDENT'S INFORMATION:

Name: _____ Class: _____
Surname Other(s) First Name

Sex: M () F () Date Of Birth: _____ Sibling/s attending WSS: YES () NO ()

Address: _____

City/Town/Community: _____ Regional Corporation: _____

Birth Certificate Pin No. _____ Country of Birth: _____

Religion: _____ Ethnic Group: _____ Nationality: _____

Hobbies: _____

Medical Information: (Please specify and attach supporting documents) _____

Allergies: YES () NO () **Respiratory Condition:** YES () NO () **Asthma:** YES () NO ()

FATHER'S / GUARDIAN'S INFORMATION:

Name: _____ I.D. Card #: _____

Address _____ Occupation: _____

Contact #: _____ / _____ Email: _____

MOTHER'S / GUARDIAN'S INFORMATION:

Name: _____ I.D. Card #: _____

Address _____ Occupation: _____

Contact #: _____ / _____ Email: _____

STUDENT SERVICES INFORMATION:

Add student's name to **School Transport List:** YES () NO ()

If YES, please specify location of pick up: _____

Add student's name to the **School Feeding List:** YES () NO ()

SOCIAL WELFARE:

Student currently receive assistance from Social Welfare: YES () NO ()

TYPE OF DEVICE Desktop YES () NO () Laptop YES () NO ()
Smart Phone YES () NO () Tablet YES () NO ()

CONNECTIVITY: YES () NO ()

CUSTODY DETAILS:

Please provide details of custody arrangements and attach supporting documents (if any)

Name of Person Providing Information: _____ Date: _____

Signature of Person Providing Information: _____ ID #: _____