

PREPARATORY EDUCATION, NEW STUDENT INFORMATION

STUDENT INFORMATION	Student's first name	Student's last name	Date (and year) of birth	<input type="checkbox"/> a girl <input type="checkbox"/> a boy
	Street address in Kerava		<input type="checkbox"/> Valid Security ban on the Population Register Center's certificate services pursuant to Chapter 4, Section 36 of the Act (661/2009)	
	Postalcode in Kerava		Postitoimipaikka Kerava	
	Native language (if not Finnish)		<input type="checkbox"/> Wishes lessons in own native language <input type="checkbox"/> Takes part Finnish as second language lessons	
	Religion <input type="checkbox"/> lutheran <input type="checkbox"/> orthodoxy <input type="checkbox"/> catholic <input type="checkbox"/> islam <input type="checkbox"/> other, which? <input type="checkbox"/> no religion		First foreign language, which?	
INFORMATION ABOUT THE GUARDIANS	Child lives with <input type="checkbox"/> mother and father <input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> other official guardian <input type="checkbox"/> Shared custody <input type="checkbox"/> Single parenthood mother / father (circle the correct one)			
	Mother's name, street address (if different than student's)		Phone number (personal)	
			Phone number (work)	
	email address			
	Father's name, street address (if different than student's)		Phone number ((personal)	
			Phone number (work)	
	email address			
	Other guardian's name, street address (if different than student's)		Phone number (personal)	
	email address			

INFORMATION ABOUT PUPIL	Former school and class	Last day in former school
	Former country and city	Date of moving to Finland

INFORMATION ABOUT STARTING	<input type="checkbox"/> Starts school as soon as possible <input type="checkbox"/> Starts school at the earliest (mark the date):	
INTENSIFIED AND SPECIAL SUPPORT	<input type="checkbox"/> Child has a special support decision or individual educational plan (IEP) <input type="checkbox"/> Child has intensified support <input type="checkbox"/> Examination concerning the learning difficulties has been started	
ADDITIONAL INFORMATION	For example information about former learning, learning problems...	
SIGNATURE AND DATE	1. Guardian's signature	Date
	2. Guardian's signature	Date

EDUCATION STAFF FILLS IN
Don't fill these parts, please.

OPPILAAAN KOULU	Koulu ja luokka-aste	Aloituspäivä uudessa koulussa
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