



INTERNATIONAL HORIZONS SCHOOL - VIRTUAL SCHOOL APPLICATION FORM

Student Information

- Student First Name:
- Student Last Name:
- Date of Birth (dd.mm.yyyy):
- Nationality:
- Contact Number:
- Email ID:
- First Language:
- Other Language(s) Spoken at Home:
- Preferred Start Date (dd.mm.yyyy):
- Address:
- Pincode:
- City:

Admission Details

- Select Admission Level: IGCSE levels AS/A Levels
- Subject Needed:



Parent/Guardian Information

- Parent/Guardian Full Name:

- Parent/Guardian Contact Number:

Additional Information

- Special needs or Requirements:

- Passport: [Keine ausgewählt]

- Birth Certificate: [Keine ausgewählt]

I hereby declare that the information provided is accurate and complete to the best of my knowledge. I understand that providing false or misleading information may result in the rejection of this application.

Please Send it Via Post

Address:

INTERNATIONAL HORIZONS SCHOOL GMBH

Hannover, Germany