

QSI International School of Sarajevo



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S6-A5

STUDENT INFORMATION FORM

SCHOOL HISTORY:

Name of student: _____

List of schools previously attended: (list last school first)

Level	Name of school	Location	Dates attended

Special interests or hobbies: _____

Has student been in any special program? Yes _____ No _____

If yes, please specify: _____

Please attach student's records from previous schools.

FAMILY HISTORY:

Parental information:

Student will live with: _____

Sibling Information: (brothers and sisters)

Name	Sex M/F	Birthdate	Name	Sex M/F	Birthdate

LANGUAGE INFORMATION:

Primary (first) language is: _____

Language spoken in home: _____

Secondary language: _____

Other: _____

Age at first word: _____

Any other information you want to tell us about your children _____
