



## SECTION 5 : STUDENTS HEALTH

ދިވެހިސަރުކާރުގެ ގެޒެޓް ގައި ބަޔާންކޮށްފައިވާ ގޮތުގައި

Any Health Issues

އެއްވެސް ބައްދަލެއް ނުވާނެތީ

Any known allergies

އެއްވެސް ބައްދަލެއް ނުވާނެތީ

## SECTION 6 : PREVIOUS SCHOOL DETAILS

ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާލެވިފައިވާ ގޮތުގައި

Previous School(s)

ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާލެވިފައިވާ ގޮތުގައި

## SECTION 7 : ABOUT THE LEVEL

ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާލެވިފައިވާ ގޮތުގައި

Level to be taken in

ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާލެވިފައިވާ ގޮތުގައި

Baby Club   
ބޭބީ ޕްލަބް

Kindergarten Level 2   
ކިންޑަރްގާރްޓަން ލެވަލް 2

Kindergarten Level 1   
ކިންޑަރްގާރްޓަން ލެވަލް 1

Kindergarten Level 3   
ކިންޑަރްގާރްޓަން ލެވަލް 3

## DECLARATION

ބަޔާންކުރުމުގެ ބައި

1. I declare that all the information given in this application form are accurate and complete.
2. If admitted, I agree to conform to the rules and regulations of the school.
3. I agree to pay the school fee.

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Date

Guardian's Signature

Please Check

ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާލެވިފައިވާ ގޮތުގައި

- You have filled in all necessary details
- You are submitting National ID Card Copy
- You are submitting the form before the due date

- ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާލެވިފައިވާ ގޮތުގައި
- ނޭޝަނަލް އިޑްކާޑް ކޮޕީ ހުށަހަޅާނެތީ
- ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާލެވިފައިވާ ގޮތުގައި

## OFFICE USE ONLY

Please ensure all the relevant sections of the application form are completed.

Received by

Signature

Data Verified by

Signature

DECISION	NOTES

Please Submit the application to the Preschool [or] email to tibyanpreschool@gmail.com

Contacts: 7790810, 9960100

Tibyan Preschool Narugisvilla, GDh.Thinadhoo Republic of Maldives

THIS FORM MAY BE REPRODUCED. NOT FOR SALE.