

Student Photo



GOOD WILL CHILDREN PRIVATE SCHOOL

Admission Form 2025-2026

STUDENT DETAILS	
Date:	Grade applying for:
Student's First Name: (As per passport)	Middle Name : Surname:
Gender: Male ☐ Female ☐	Religion: ☐ Muslim ☐ Christian ☐ Other
Date of Birth ____/____/____ DD/ MM/ YYYY	Country of Birth
Mother Language	Nationality:
	Second Language :

FAMILY INFORMATION	
Father Name:	Mother Name:
Nationality:	Nationality :
Occupation:	Occupation:
Email Address:	Email Address:
Mobile#	Mobile#
Additional Contact Person (family/friends) 1. 2.	
Current Residence Information: Area:/ Locality_____	
Section:_____ Street: _____ Plot No:_____	
Student is living with: Parents () Mother only () Father only () Others(Specify)	

Last School Attended	Last Grade Attended	Curriculum	Academic Year	Date of Leaving

The school tuition fees may be payable a year in advance or in 3 installments: Re-registration fee (non-refundable) is as below:

KG1&KG2 – AED 1,200

GRADE 1 TO 8 – AED 1,500

- 1st Installment: upon enrollment
 2nd Installment: due on 5th December
 3rd Installment: due on 5th March

STEP 1: ADMISSION	ESIS No:
Student's Name: _____ Grade: _____	
Student has Internet: Yes ☐ No ☐ Use Private transportation ☐ Student has Laptop: Yes ☐ No ☐ Use School transportation ☐	
Remarks: _____ _____	

BRING YOUR OWN DEVICE

As you are aware that teaching and learning have taken a new turn towards E-learning where technology plays a very important role we request that all students from Grade 1 to Grade 8 are equipped with their own devices for example like a Tablet, IPad or Laptop so they can use in the school and at home. Also please make sure to enable the device with the following specifications.

The device minimum specifications are:

IPad / Tablet Specs	Laptop Specs
Samsung / Apple / Huawei etc.	Intel i5 or i7 (min Quad Core) processor
64 GB – 128 GB memory capacity	Windows 10 x 64-bit OS
4 GB of RAM	8 GB of RAM
At least Quad Core processors	At least a 500 GB hard drive (128 SSD hard drive preferred).
MS office 2016 installed	MS office 2016 Pro
Camera at least 8 MP Front and Rear	Camera at least 2MP
Network at least 5G LTE	Wireless networking adapter (for internet)
Maximum expandable memory at least 250 GB	HP / Dell / Lenovo / MacBook, etc. brand of laptop preferred.
Display Resolution HD	
Processor speed at least 2GHz	
Micro USB charging type	

Note to parents: Please ensure that this device is used only for school purpose and NO other apps or games are installed. This is for the students' safety as per our school online safety policy.

Agreement Form

I acknowledge the following statements

Please indicate if you agree or disagree with the statements below

My house has access to internet, a computer and printer to support my child's learning and development	Agree ☐	Disagree ☐
My child has been acknowledged not to open unsuitable websites and will strictly adhere to Good Will Children Private School. Internet Policy. Violating this will have severe consequences	Agree ☐	Disagree ☐
My child can use the toilet independently	Agree ☐	Disagree ☐
My child is differently-abled and is a student of determination (Special needs)	Agree ☐	Disagree ☐
I agree that, if selected, my child's photograph or work maybe published to celebrate school activities or advertising on the school website, school newsletters, Facebook, Instagram or any associated website subject to the school rules. Also Please note that events/activities can be live on the school social media accounts. Also please notify the school if you need to change your selection.	Agree ☐	Disagree ☐
I ensure that my child will follow all school rules including during field trips and on the school transport.	Agree ☐	Disagree ☐
I confirm that I have read and explained the Student Code of Conduct to my child and we have signed it.	Agree ☐	Disagree ☐
I agree to pay the fees regularly and timely in order to avoid any inconvenience in claiming benefits	Agree ☐	Disagree ☐
I allow the school registered nurse to administer Non-prescribed medications: • Paracetamol to control mild pain and fever • Application of Pain killer cream • Application of antihistamine cream • Administration of Epinephrine in an acute allergic reaction (anaphylactic shock) • Administration of Salbutamol inhaler to control asthmatic symptoms. • Administration of oral Glucose for hypoglycemia. • Others, please specify:	Agree ☐ ☐ ☐ ☐ ☐ ☐ ☐	Disagree ☐ ☐ ☐ ☐ ☐ ☐ ☐
I acknowledge that my child be transferred to hospital in the case of severe emergency without permission from the parent beforehand. This will only be applied in severe cases determined by school nurse or school management.	Agree ☐	Disagree ☐
I hereby grant permission for my child to attend all educational trips. Whilst appreciating your assurance for the safety of my child, I undertake not to hold the school/staff liable for any damage, injuries or accidents due to any unforeseen circumstances.	Agree ☐	Disagree ☐

1. I hereby undertake not to ask, or make a claim for the refund of the registration fee, once paid / deposited in the Bank, under any circumstances and for any reason whatsoever.
2. I declare that all information given in this form is true and correct, and that all documents provided by me are authentic.

Name: _____

Signature _____

Parent/Guardian (In case of Guardian, please mention name and relationship with the child and Passport No.)