

# APPLICATION FOR ADMISSION

## NOVA High School

Praska bb, 1000 Skopje, Macedonia  
phone: (+389 2) 3076-402, 3061-807, 3061-907  
fax: (+389 2) 3076-299



APPLICATION FOR GRADE \_\_\_\_\_ FOR THE ACADEMIC 20 \_\_\_\_ / 20 \_\_\_\_

*Financial aid is needed*

STUDENT NAME \_\_\_\_\_  
Last First (include nickname) Middle

HOME ADDRESS \_\_\_\_\_  
Street City State/Country Zip Code

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

COUNTRY OF CITIZENSHIP \_\_\_\_\_ GENDER  M  F

ID Number (Macedonian citizens) \_\_\_\_\_ Passport number (Foreign citizens) \_\_\_\_\_

### FATHER'S INFORMATION

NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_

MOBILE PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

OCCUPATION \_\_\_\_\_

JOB TITLE \_\_\_\_\_

NAME OF FIRM \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

EMERGENCY CONTACT NAME & PHONE \_\_\_\_\_

### MOTHER'S INFORMATION

NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_

MOBILE PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

OCCUPATION \_\_\_\_\_

JOB TITLE \_\_\_\_\_

NAME OF FIRM \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

Are both parents living? \_\_\_\_\_ Are the parents separated? \_\_\_\_\_ Divorced? \_\_\_\_\_

If the parents are separated or divorced, who has legal custody? \_\_\_\_\_

With whom does the applicant reside? \_\_\_\_\_

Has the applicant ever been in, or referred to, any Special Education Program?  Yes  No

Does the applicant, to your knowledge, have any form of learning difficulty?  Yes  No

Does the applicant have any physical disabilities?  Yes  No

If you answered "yes" to any of the above questions, please explain \_\_\_\_\_

Has the applicant previously applied to NOVA Schools? \_\_\_\_\_ If so, when? \_\_\_\_\_

Do other children in the family attend NOVA Schools? \_\_\_\_\_ Grades \_\_\_\_\_

Who referred you to NOVA High School? \_\_\_\_\_

Previous or transferring school \_\_\_\_\_

School address \_\_\_\_\_

Grades attended \_\_\_\_\_

I/We hereby authorize NOVA High School to contact schools and other sources to obtain information to support this application. The undersigned releases every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents, and other information provided to NOVA High School for that purpose. We agree to allow these records to be stored in the school's data base, so as to be used for its needs.

Date of application \_\_\_\_\_

\_\_\_\_\_  
Father's signature (or legal guardian)

\_\_\_\_\_  
Mother's signature (or legal guardian)

***NOVA High School practices a policy of nondiscrimination in employment and admission. We hire employees and admit students of either sex, and of any race, color, non-disqualifying handicap, religion or creed, national or ethnic origin.***

**For Office Use Only**

Interview Date _____	Grade _____
Starting Date _____	Language Proficiency _____
Last day of attendance _____	Application Fee _____
Documentation received: <input type="checkbox"/> Transcripts	<input type="checkbox"/> Birth Certificate or Copy of Passport
	<input type="checkbox"/> Statement of Health