

EXPRESSION OF INTEREST FOR ADMISSION

Name of the Student:(Full	
Date of Birth: Year Month Day	Age: years months(Counting of age as on Sept.01)
Place of Birth: City:	Country:
Nationality:	Religion: Muslim Non-Muslim
Residence Address :	P.O.Box:
Parent (SPONSOR) /Guardian's Name:	Relationship:
Occupation:Company name:	Land phone:
Mobile Nos. : (Father) (Mother)	Email:
Emirates ID No:	Expiry date:
Passport No:From	То
Resident Visa No:From	То
I fully understand and note that: a) Expression of Interest DOES NOT GUARANTEE admission. b) The School holds no responsibility in the case of non-availability of seats for those who wished to be kept on waiting list.	
Name and signature of the Parent:	
Date:	
Remarks:	
After filling and their forms. Discuss we will their to little as a subscript of some will a second	

After filling out this form, Please mail this to littlepearlsnursery@gmail.com For any clarification, contact 037673544, 0504803448.