**Pre-IB student’s application form 2024-25****(PLEASE USE CAPITAL LETTERS)**

**STUDENTS COMING FROM A DANISH SCHOOL**

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| Students coming from a Danish School should apply via www.optagelse.dk and need not send in paper application |

**STUDENT**

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| --- | --- | --- |
| Surname: | Cpr.no. (date of birth): | |
| First name(s): | Citizenship: | Sex:  Male □ Female □ |
| Street: | | |
| Postal code, city, country: | | |
| Phone: | E-mail: | |
| Present School: | Grade: | |

**PARENTS/GUARDIANS**  
Mother/Guardian

|  |  |
| --- | --- |
| Surname: | Cpr.no. (date of birth): |
| First name(s): | Citizenship: |
| Street: | |
| Postal code, city, country: | |
| Phone: | E-mail: |

**PARENTS/GUARDIANS**  
Father/Guardian

|  |  |
| --- | --- |
| Surname: | Cpr.no. (date of birth): |
| First name(s): | Citizenship: |
| Street: | |
| Postal code, city, country: | |
| Phone: | E-mail: |

**ACCOMODATION:**

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| Are you interested in accommodation near the school? Yes □ No □ |

**PRIORITY**

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| I am applying to the Pre-IB at Ikast-Brande Gymnasium as my first priority: Yes □ No □ |
| If no which school is your first priority? |

**FORMER SCHOOLS**

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| Have you previously attended a Danish IB-school: Yes □ No □ |
| If yes which Danish IB-school? |

**SUBJECT CHOICES**

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| 2nd language  - Choose only one language as your second language | * German (continuing) * Spanish (beginner) |
| Arts - Choose only one subject | * Film * Music |

**YOUR LEVEL OF DANISH (important)**

|  |  |
| --- | --- |
| Level of Danish | * Beginner’s * Intermediate * Fluent |

**PLEASE ENCLOSE**

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| * Latest report card. (if you have intended different schools in the last two years, please send us the latest report cards from both schools) * Other (for example special needs, dyslexia documentation, medication) |

**IB SPORT**

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| Are you applying for IB Sport? Yes □ No □  If yes: Have you been approved by a team/club? Yes □ No □  If yes:  Which team/club: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**WHERE DID YOU FIRST HEAR ABOUT US?**

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| * Friends | * www.ikast-gym.dk | * Facebook |
| * Family | * Advertisement | * Brochures |
| * Information meeting | * Guidance counsellor | * Other |

**MOTIVATION FOR APPLYING**

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| What are you most looking forward to studying in IB and why? |

**SIGNATURES AND DATE**

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| --- | --- |
| Student: | Parent/guardian: |
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