



Application for Summerschool 2020

1

It is important that all fields are filled out correctly.
Please make a copy of the form and e-mail to us at summer@sanktjoseph.dk

WEEKS

Week 27: 29/6-3/7 2020

Week 28: 6/7-10/7 2020

INFORMATION ABOUT THE STUDENT

Nationality	
CPR number	
First Name	
Last Name	
Student's age	

Student of Institut Sankt Joseph? Yes No Grade

Female Male

Does the student speak Danish? Does the student speak English?

STUDENT'S MOTHER/FATHER/GUARDIAN

Nationality	
CPR number	
First Name	
Last Name	
Contact Phone	
Contact Phone	
E-mail	

ADDITIONAL INFORMATION



Does the student have any special needs?
Does the student have any special dietary requirements?

Once we have received the minimum amount of applications that we require to run the summer school we will then be in contact again to send you payment details.

I give permission for my child to be photographed or filmed which may be used internally in the school, with relation to marketing.

2

SIGNATURE

Name/Signature (printed names is fine)

Send via mail to the school:

*Attach the application form to your mail and send it to summer@sanktjoseph.dk
Or send a printed copy as an attachment.*

