

**Erzsébetvárosi Magyar-Angol Két Tanítási Nyelvű Általános Iskola  
és Művészeti Szakgimnázium/Hungarian-English Bilingual Elementary School  
and Art Secondary School of Erzsébetváros/**

**Data form/enrolment form**

Surname of the student:	Firstname of the student:
Place and date of birth:	Class:
Educational number (oktatási azonosító):	Male/Female:
Permanent address:	
Temporary address:	
TAJ number (national health insurance card number): _ _ _ _ _	OM code number:
Nationality/Nationalities::	
Student's phone number:	
<b>Parents information:</b>	
Mother's name:	
Mother's maiden name:	
Mother's permanent address	
Mother's temporary address:	
Mother's phone number:	Mother's e-mail address:
Father's name::	
Father's address (maiden/temporary):	
Father's phone number:	Father's e-mail address:
<b>Other data about the student</b>	
Guardian's name/The person who takes care for the child:	
Guardian's phone number:	
Optional other ways of contact (phone number, e-mail, etc.):	
Allergy to any kind of food or medicine:	
Any other health problem:	
In case the last lesson is cancelled the student can leave school:    yes                  no	

Hereby I declare that all data provided above is true. Furthermore, I undertake that any change in data will be reported to the school within 3 working days.

Date: 20\_\_ . \_\_ . \_\_

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signature of the parent / guardian