



ENTRANCE EXAMINATION APPLICATION FORM

Academic year _____ - _____

PLEASE COMPLETE IN CAPITAL LETTERS

SURNAME: <i>(As per birth certificate)</i>		NAME: <i>(As per birth certificate)</i>	
DATE OF BIRTH:		MALE: <input type="checkbox"/>	FEMALE: <input type="checkbox"/>
PLACE OF BIRTH:		IDENTITY CARD NO.:	
NATIONALITY:		PASSPORT NO.:	
HOME ADDRESS:	Street & No.:		Post code:
	Town/Village:		
MOBILE TELEPHONE:		EMAIL:	
PREVIOUS SCHOOL ATTENDED & CLASS:			
FATHER'S DETAILS			Tick if deceased <input type="checkbox"/>
SURNAME:		NAME:	
IDENTITY CARD NO:		PASSPORT NO:	
HOME TELEPHONE:		WORK TEL.	
MOBILE TELEPHONE:		EMAIL:	
ADDRESS: <i>(If different)</i>	Street & No.:		Post code:
	Town/Village:		
MOTHER'S DETAILS			Tick if deceased <input type="checkbox"/>
SURNAME:		NAME:	
IDENTITY CARD NO:		PASSPORT NO:	
HOME TELEPHONE:		WORK TEL.	
MOBILE TELEPHONE:		EMAIL:	
ADDRESS: <i>(If different)</i>	Street & No.:		Post code:
	Town/Village:		
HOME ADDRESS <i>(If mailing address different, please list overleaf)</i>			
PLEASE INDICATE ANY LEARNING DIFFICULTIES			
PLEASE INDICATE ANY MEDICAL CONDITIONS <i>(Including dietary requirements)</i>			
<p>In signing below, you accept the following: The American Academy Larnaca is not obliged to return students' Entrance Exam scripts, or make students' detailed grades publicly available.</p> <p>DATA PROTECTION: Consent for the collection and processing of personal data: I fully understand and freely express my consent with this statement for the use, processing, collection, registration, transfer and saving of personal data general and/or sensitive by the American Academy Alumni Foundation ("the Foundation") and its authorized employees, partners and collaborators who are appropriately trained for the processing of personal data. The data has been or will be provided to the Foundation by me or has been secured by the Foundation for purposes related to the provision of services by the Foundation in accordance to the provisions of General Data Protection Regulation 2016/679 of the European Parliament and the Law for the Protection of Individuals with regard to the Processing of Personal Data and the Free Movement of such Data Act 2018 (Law 125 (I) / 2018) as amended from time to time. The legislation concerns among others, the rights to access, to rectify, to delete, and to oppose processing, all of which you can exercise by contacting us at dpo@academy.ac.cy The Foundation is the Data Controller. Any information relating to my person shall not be disclosed to third parties except to the ones mentioned above unless I have been asked and given my consent or in accordance with any Law or judgment or if it is in the public interest or if it is necessary for the preservation the legitimate interests of the Foundation.</p>			
PARENT'S / GUARDIAN'S NAME:		SIGNATURE:	DATE:
PARENT'S / GUARDIAN'S NAME:		SIGNATURE:	DATE: