

Pre-school registration (Cycle 1)

School Year 2024/2025

Yes * No

*** Please enter only the child's name and fill in the field on the back.**

Child

Last name:	
First name :	
Gender :	<input type="radio"/> female <input type="radio"/> male
Social security number :	
Place of birth:	
Nationality :	
Native language :	
Attended a nursery:	<input type="radio"/> yes <input type="radio"/> no

Legal representatives

Family Name:	Family Name:
First Name:	First Name:
Social security number: _____	Social security number: _____
<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Tutor:	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Tutor:
Mobile phone number:	Mobile phone number:
Private phone number:	Private phone number:
Office phone number:	Office phone number:
Email:	Email:
Home address _____ _____	Home address _____ _____

New school hours

<u>Morning</u>	07:50 à 11:30 a.m.
<u>Afternoon</u>	13:45 à 15:45 p.m.

If you have any problems or require further information, please contact the local school office

Michel DONVEN phone: 360808 – 2225 / Marie-Paule MULLER phone: 360808-2268

Daniela ANDERLINI phone.: 360808 – 2234/ Chantal BERNARD phone: 360808 – 2231

Martine WAGNER phone: 360808 - 2230

*** This section only needs to be completed if your child attends a school that is not under the control of the municipality of Hesperange.**

I would like to inform you that my child _____ will attend the primary school in _____ from 15 September 2024.

_____ Date

_____ Signature

Area reserved for the municipality of Hesperange

- School Howald-Couvent, 1, rue de la Redoute
- School Alzingen "Am Duerf", 20, rue de Syren
 - School Itzig, 2, rue de l'Ecole
- School Fentange, 75, rue de Bettembourg
- School Hesperange, 9, rue de Bettembourg