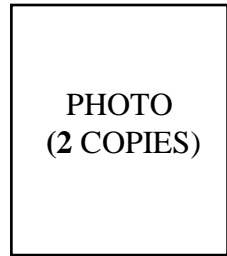


**XV. GIMNAZIJA**  
**IB World School**  
**Jordanovac 8, Zagreb 10000**  
**Croatia**



# APPLICATION FORM

**INTERNATIONAL BACCALAUREATE MIDDLE YEARS PROGRAMME**  
**SCHOOL YEAR 2018 /2019**

**PART I - COMPLETED BY CANDIDATE OR PARENT/GUARDIAN**

**Applying to grade:** \_\_\_\_\_

Application date: \_\_\_\_\_

Enrolment date: \_\_\_\_\_

<b>STUDENT</b>	
<b>Name</b> (family name first):	
Gender (encircle):	M                      F
Date of Birth:	
Place of Birth:	
Nationality:	
Citizenship:	
Address in Croatia:	
Telephone No. (home and mobile)	
Permanent Address (if different):	
E-mail address:	
OIB for foreign citizens:	
<b>FAMILY</b>	
<b>Mother's Name:</b>	
<b>OIB:</b>	
Occupation:	
Name of Employer:	
Business Phone No. & mobile:	
E-mail address:	
<b>Father's Name:</b>	
<b>OIB:</b>	
Occupation:	
Name of Employer:	
Business Phone No. and mobile:	
E-mail address:	
Are the parents living apart, separated or divorced?	
Student lives with:	
Number of children in the family:	

**PREVIOUS SCHOOLS ATTENDED:**

Name of School	City / Country	From/To (Month & Year)	Grade

**LANGUAGE PROFILE:**

Student's mother tongue / best language:	
Other languages spoken:	
English studied for how many years:	

HAS THE STUDENT EVER BEEN **HELD BACK OR MOVED UP A GRADE?** (If yes, please provide details):

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DOES THE STUDENT HAVE **ANY MEDICAL CONDITION?** (If yes, please provide details):

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**ENGAGEMENT IN SPORTS ACTIVITIES** (name activities):

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**ENGAGEMENT IN MUSIC OR ANY ART ACTIVITY:**

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**ENGAGEMENT IN ANY OTHER EXTRACURRICULAR ACTIVITY, HUMANITARIAN OR COMMUNITY ORGANISATION** (e.g. Red Cross):

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**PARTICIPATION IN ANY KNOWLEDGE COMPETITION** (name the competition and the place held):

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**Documents to be enclosed with this application form:**

1. grade transcripts of two previous years (Official school transcripts)
2. proof of citizenship
3. two photos ( passport size)

**PART II - COMPLETED BY CANDIDATE (IN BLOCK CAPITALS)**

DESCRIBE IN ENGLISH REASONS FOR APPLYING TO THE **IBMYP**

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Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**PART III - COMPLETED BY PARENTS OR GUARDIANS**

1. I hereby agree that my child be enrolled in the IBMYP:

YES

NO

2. Why do you think this programme is good for your child?

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3. I hereby **declare that I have been introduced to the IBMYP and that my child will comply with the school regulations and adhere to the IBMYP Curriculum.**

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## PART IV – NOTICE OF PROCESSING PERSONAL DATA WHEN CONSENT OF DATA SUBJECT IS NOT NECESSARY – SIGNED BY PARENT/GUARDIAN

**XV. gimnazija processes student's and parent's personal data because of fulfilling obligations in the field of education according to the Croatian law, IB regulations and internal school acts.**

CONTROLLER	XV. gimnazija
DATA PROTECTION OFFICER'S CONTACT	<a href="mailto:isimic@mioc.hr">isimic@mioc.hr</a>
DATA SUBJECT	<ul style="list-style-type: none"> <li>- student</li> <li>- parent/guardian</li> </ul>
LEGAL BASIS	<ul style="list-style-type: none"> <li>- Primary and Secondary School Education Act</li> <li>- by-laws</li> <li>- Statut XV. gimnazije</li> <li>- IBMYP: General regulations</li> <li>- IBDP: General regulations</li> </ul>
PURPOSES	<ul style="list-style-type: none"> <li>- protection the vital interests of the data subject</li> <li>- compliance with a legal obligation to which the controller is subject</li> <li>- performance of a task carried out in the public interest or in the exercise of official authority vested in the controller</li> <li>- performance of a contract to which the data subject is party or in order to take steps at the request of the data subject prior to entering into a contract</li> <li>- protection of persons and property</li> </ul>
CATEGORIES OF RECIPIENTS	<ul style="list-style-type: none"> <li>- government bodies in charge</li> <li>- public institutions in charge</li> <li>- founder (City of Zagreb) and founder's bodies in charge</li> <li>- service providers in extra-curricular activities</li> <li>- International Baccalaureate Organization</li> <li>- institutions where students volunteer for CAS requirements</li> <li>- bodies in charge of enforcement proceedings</li> </ul>
STORING PERIOD	<ul style="list-style-type: none"> <li>- permanent except:</li> <li>- data concerning health and family status – 5 years</li> <li>- personal data obtained by a video surveillance of common rooms – maximum 6 months, except when longer storing is necessary</li> </ul>
DATA SUBJECT'S RIGHTS	<ul style="list-style-type: none"> <li>- to request access to his/her personal data</li> <li>- to request rectification or erasure of personal data or restriction of processing concerning the data subject</li> <li>- to object to the controller</li> <li>- to object to Croatian Personal Data Protection Agency</li> <li>- data portability</li> </ul>
OBLIGATION OF PROVIDING PERSONAL DATA	<ul style="list-style-type: none"> <li>- statutory or contractual requirement/a requirement necessary to enter into a contract</li> </ul>

Signature: \_\_\_\_\_

## PART V - COMPLETED BY SCHOOL THE CANDIDATE HAS ATTENDED LAST

Student: \_\_\_\_\_

1. We kindly ask the homeroom teacher to provide her/his opinion about the candidate which should include:

- a) estimation of candidate's abilities and working habits
- b) personal characteristics
- c) extracurricular activities
- d) attendance

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2. Estimate the following characteristics of the candidate:

	<b>A</b> Excellent	<b>B</b> Above average	<b>C</b> Average	<b>D</b> Below average	<b>E</b> No basis for judgement
<b>Ability to work in a group</b>					
<b>Adaptability</b>					
<b>Communicative skills</b>					
<b>Care for others</b>					
<b>Creativity</b>					
<b>Diligence</b>					
<b>Initiative</b>					
<b>Maturity</b>					
<b>Motivation</b>					
<b>Open-mindedness</b>					
<b>Self-control</b>					
<b>Self-confidence</b>					

Homeroom Teacher's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_