# BASIS BEGINNERS PRAGUE APPLICATION PACKAGE

school year



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SCHOOL	YEAR	LAPPLIC	AHUN	PACKAGE



## **CHECKLIST**

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#### REQUESTED RECORDS

Lilled out and signed <b>Application</b> form
$\square$ Evidence of regular vaccinations of the child (a copy of the child's vaccination records)
☐ A copy of the child's health insurance card
☐ Copy of parents ´ID
☐ Filled out and signed <b>Pediatrician's Confirmation</b> form
☐ Filled out and signed <b>Questionnaire</b> form
☐ Filled out and signed <b>Consent to Processing Child's Personal Data</b> form



# **APPLICATION**

#### **EARLY EDUCATION APPLICATION FORM**

1. PARENT (personal information)	
First and last name	
Address	
Telephone	
2. CHILD (personal information)	
First and last name	
Nickname	
Date of birth (mm/dd/yyyy)	
Address	
Nationality	
Czech I.D. or passport number	
Gender	
Native language	
Other spoken languages	

ATTENDANCE	
<b>Full Day:</b> 7:30-17:30	□ All □ Mon □ Tue □ Wed □ Thu □ Fri
<b>Half Day:</b> 7:30-13:00	□ All □ Mon □ Tue □ Wed □ Thu □ Fri
Note: Academic Program is from 8	8:30 to 14:30 and Enrichment Program is from 14:30 to 16:30.
CATERING	
Full-day catering (snack, lunch.	n, snack, snack) 🗆 All 🗆 Mon 🗀 Tue 🗀 Wed 🗀 Thu 🗀 Fri
	, , ,
DADENT CTATEMENT	
PARENT STATEMENT	
process all of the given personal	n information is true and I agree that the BASIS International Prague, s.r.o. company will data in this Application in accordance to the General Data Protection Regulation (GDPR) ude the Preschool Attendance Contract according to the Principles of Processing Persona inners.cz.
Note: Stored data will not be avail	lable to third parties.
	hat a condition for concluding the Preschool Attendance Contract is providing others which will be provided to the preschool at the latest during the signature of the Contract.:
Evidence of the child's regu	ular vaccinations records (vaccination card)
Copy of Health Insurance Ca	
Filled out and signed Pediat	
<ul> <li>Filled out and signed Quest</li> </ul>	tionnaire form ent to Processing the Child's Personal Data form
Filled out and signed Conse	and to Processing the Child's Personal Data form
	not aware of any reasons (neither legal nor factual) which would prevent the child to rten in the regular regime (for example, the medical state of the child, necessary socia
Date	
	ardian
Signature of the legal guardian	1

..... SCHOOL YEAR | Application

BASIS Beginners Prague





## PEDIATRICIAN'S CONFIRMATION

#### PEDIATRICIAN'S CONFIRMATION OF THE CHILD'S MEDICAL FITNESS

Full name of child
Date of birth
Address
1. CHILD'S MEDICAL FITNESS
Confirmation that the child
☐ is medically fit
☐ is not medically fit
☐ is medically fit with a condition (with a restriction)
Has undergone the mandated regular vaccinations ☐ Yes ☐ No
Comments

2. ALLERGIES		
Is allergic to		
CURRENT MEDICATION LIST		
Medication	Dose	Frequency
Date of issue		
Name of pediatrician		
Signature of pediatrician		
(please include the stamp below)		

...... SCHOOL YEAR | Pediatrician's Confirmation

BASIS Beginners Prague





# **QUESTIONNAIRE**

EARLY EDUCATION PARENT QUESTIONNAIRE
Child's first and last name
CHILD'S HEALTH INFORMATION
1. Allergies ☐ Yes ☐ No
□ Food
☐ Animals (bites)
☐ Medicine
□ Other
2. Does your child take any medications?
If yes, list the medication
3. Does your child have any dietary restrictions or requirements? ☐ Yes ☐ No
4. Does your child have any limitations for ordinary school activities (asthma, diabetes, epilepsy, surgery, etc.)?
5. Does your child wear ☐ Glasses ☐ Contact lenses ☐ Hearing Aid ☐ Other
6. Is the child toilet trained? ☐ Yes ☐ No
7. Health insurance company
8. Pediatrician's full name
9. Pediatrician's telephone
10. In case of health emergency, I agree that BASIS Beginners Prague provides first aid to my child. $\square$ Yes $\square$ No
Note: Please provide a copy of the child's medical insurance card and copy of the child's vaccination records.

BASIS Beginners Prague	SCHOOL YEAR   Questionnaire

## CONTACT PERSON(S)

The following contacts have permission to pick up the child at BASIS Beginners Prague:

The following contacts have permission to pick up the child at BASIS Beginners Frague.
1. Parent (guardian)
Emergency/primary contact
Full Name
Nationality
Relationship to child
Does this parent have custody/legal guardianship of the child? $\square$ Yes $\square$ No
Does the child live with this parent? ☐ Yes ☐ No
Is this parent the primary point of contact for admission correspondence? $\square$ Yes $\square$ No
English language proficiency 🗆 Beginner 🗆 Functional 🗆 Nearly Fluent 🗆 Fluent/Native
Address
Telephone
E-mail
2. Parent (guardian)
Emergency/primary contact
Full Name
Nationality
Relationship to child
Does this parent have custody/legal guardianship of the applicant? $\square$ Yes $\square$ No
Does the child live with this parent? ☐ Yes ☐ No
Is this parent the primary point of contact for admission correspondence? $\ \square$ Yes $\ \square$ No
English language proficiency 🗆 Beginner 🗀 Functional 🗀 Nearly Fluent 🗀 Fluent/Native
Address
Telephone
E-mail

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J.	$\sim$		↽	13

Full name	 	 
Relationship to child	 	 
Telephone	 	 
Full name		
Relationship to child	 	 
Telephone	 	 
Full name	 	 
Relationship to child	 	 
Telephone		
Date	 	 
First and last name of legal guardian	 	 
Signature of the legal guardian		



# **CONSENT: PERSONAL DATA**

CC	INSENT TO PROCESSING CHILD'S PERSONAL DATA
Ch	ild's first and last name
Da	te of birth (dd/mm/yyyy)
reg Int	accordance with the Regulation of the European Parliament and Council (EU) about the protection of individuals in gard to processing personal data and in the free movement of such data (GDPR Regulation), I hereby grant BASIS ernational Prague, s.r.o. ID No.: 06957005 with the registered office at Nad Tejnkou 391/10, Břevnov, 169 00 Prague 6, gistered in the Commercial Register maintained by the Municipal Court in Prague, Section C, Entry 292031 dministrator or Preschool), consent to processing my child's personal data:
1.	To all the following personal data, which are all mandated requirements for the conclusion of the Child's Preschool Attendance Contract:
	<ul><li>name and surname,</li><li>birthdate,</li></ul>
	• permanent, alternatively temporary residence,
	parent information (identification, contact details)
2.	To the all of the following personal data which are all necessary for the due fulfillment of the Child's Preschool Attendance Contract (check box for consent):
	□ native language and knowledge of other languages,
	$\square$ Czech birth number, if one is given,
	$\square$ information about siblings, family members and other authorized persons,
	$\square$ medical fitness according to the questionnaire (especially allergies, sickness, medications, vaccinations),
	☐ details about health insurance company,
	details about other contact persons (pediatrician, legal guardians, etc.);
3.	To the following child's personal data that do not have an effect on the conclusion or the fulfillment of the Child's Preschool Attendance Contract (check box for consent):
	□ nationality;
The	e above mentioned personal data shall be authorized to be processed by the Administrator for the following purposes:

- conclusion of the Child's Preschool Attendance Contract,
- keeping the necessary health records,
- recording data and photos for internal uses of the Administrator,
- organizing events (fieldtrips, excursions....),
- accompaniment of the child (pick-up),
- improving education at the Preschool.

SCHOOL	VEAR	Consent: Personal Data

4. In addition to the above the given consents, I agree that the photos (including group photos) and audio/video recording of my child taken during Preschool events and activities can be published (check box for consent):
☐ on the Preschool's website,
$\square$ on social media (for example, Facebook etc.),
☐ in print,
$\square$ in promotional materials of the Preschool,
☐ for the purpose to promote the Preschool and its presentation.
I grant the consent for the entire duration of my child's attendance to the Preschool and for the legally mandated period necessary for its processing, otherwise for a period of 10 years after the end of the Child's Attendance to Preschool Contract. I grant the consent only to the Administrator, who, without statutory cases cannot provide this personal data to other persons or authorities for purposes other than the intended purposes and must secure the data against unauthorized or accidental access and processing, and against any editing, destruction, misuse or loss.
I acknowledge that the consent can be withdrawn at any time by sending a letter or e-mail to the contact information of the Administrator: <b>info@basisbeginners.cz.</b>
I acknowledge that the processing of the above mentioned personal data is done by the Administrator, however the recipient or processors of the above mentioned personal data can be other persons, especially the provider of the software used by the Administrator and colleagues of the Administrator.
I was made aware of my rights, especially about my right to withdraw this consent at any time without giving a reason about the access to this data, about the right of its editing or deletion, that granting the above mentioned persona data is voluntary, about the right of knowing where the personal data was processed and for what purpose.
I further confirm that I was made aware that if I find out or believe that the Administrator performs the processing of personal data in contradiction to the protection of personal and private life or in contradiction to the law, especially is the personal data is not accurate in regards of the purpose of its processing, I can request an explanation and removate of such occurred state. Particularly, in regards to blocking, making a correction, making addition or disposing personal data. I also confirm that I was made aware that in the case of doubt regarding the fulfilment of the requirements about the processing of personal data, I can contact the Office for Personal Data Protection.
Finally, I acknowledge that in the case of concluding the Child's Preschool Attendance Contract, the processing of the above particularly mentioned personal data is necessary or required for fulfilling this Child's Preschool Attendance Contract, where in the case of not granting the consent of processing such described personal data, the Preschool has the right, in justified cases, to deny allowing the child to attend the Preschool in order to provide security to the child or third persons (especially regarding the medical fitness).
All of the information I provided is current, accurate and complete. I acknowledge that the Preschool is not responsible for any damage caused by information that was provided incomplete or inaccurate.
Date
First and last name of legal guardian
Signature of the legal guardian
First and last name of legal guardian

Signature of the legal guardian