



Caribbean Education Institute Suriname
Mangrovestraat Beekhuizen
Telephone: 403051/8635393

SURNAME.....

FIRST NAME..... MIDDLE NAME.....

SEX MALE FEMALE

ADDRESS.....

PHONE.....

E-MAIL ADDRESS.....

DATE OF BIRTH.....

PLACE OF BIRTH.....

NATIONALITY.....

RELIGION.....

PREVIOUS SCHOOL(S) ATTENDED:

1.....

CAREER INTEREST.....

PARENTS/GARDIAN'S

NAME.....

ADDRESS.....

PHONE.....

IN CASE OF EMERGENCY CONTACT

NAME.....

RELATIONSHIP.....

ADDRESS.....

PHONE.....

REGISTRATION DATE:.....