



Oslo kommune
Utdanningsetaten
Bjørnholt skole

Søknadsskjema for engelsklassen (IBC) 8. trinn Bjørnholt skole

Part I: Student Information	
Student's full name:	
Male _____ Female _____	Social security number: (fødselsnummer)
Nationality:	
Primary language spoken at home	Other languages spoken
Email address	

PART II: Parent Information		
Father's name:		Mother's name:
Mailing address		
Street address		
City	Postal code	Country
Telephone		Mobil
Email address		

PART III: Educational Background		
Name of most recent school attended:		
Mailing address		
Street address		
City	Postal code	Country
Teacher's name		
Email address		



Utdanningsetaten
Bjørnholt

Postadresse:
Slimeveien 15
1277 Oslo

Telefon: 23 46 35 00

E-mail: bjornholtgs@ude.oslo.kommune.no
<https://bjornholt.osloskolen.no/>

Besøksadresse:
Ungdomstrinnet: Slimeveien 15



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PART IV: Emergency Contact Information

Please name another adult than the parents, who can be contacted in case of an EMERGENCY.

Name	Relationship
Address	
City	Telephone
Mobile	Email address

How did you hear about this program? _____

PART V: Student Essay

Write a few paragraphs describing yourself, interests, and why you would like to attend the The English Class at Bjørnholt school.

Parent's signature_____ Date_____ Student's signature_____ Date_____



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