Luckenberger Schule

Städtische Grundschule Neuendorfer Straße 12 **14770 Brandenburg an der Havel** Tel. 03381/224132 Fax 03381/21113249

School according to catchment area

Date of registration:	
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Please fill out in block letters! For internal use only!

Registration for the school admission procedure for the 2025/26 school year

Favourite primary school					
Note for schools with congrupe Decisive for the admission of reasons. If admission to the the nearest primary school with the	decision are the proximit desired school is not p				
Data of the child (in accordar	nce with the Data Protect	ion Ordinanc	e on Educa	tion)	
Last name					
First name					
Date of birth					
Place of birth					
Gender					
Nationality					
Native language					
Residence status **					
Religion*					
Residential address					
Daycare centre visited so far					
Land madian	1	Finat		Family status *	
Legal guardian Mother	Last name	First	name	Family status *	
Father					
Other					
Other					
Data of the legal guardians	Mother		Father		
Residential address					
Workplace					
Health insurance of the child					
Private phone					
Business phone					
E-mail address *					

Special instructi the legal guardia						
		e accuracy of all inform		ovided.	I have been	informed that t
Signature:						
Incoming proces	ssing by the	e school responsible	for th	e place	of residence	<u>ce</u>
Facts of the case			Yes	No	Date	Remark
Parents raise conce	erns about sc	hool admission				
Need for support is	suspected					
Special educationa	l needs are s	uspected				
Antragstellung	Early schoo	enrolment				
(Die Anträge sind gesondert zu stellen.)	Deferral from	n school attendance				
,	Promotion of	ommittee procedure				
		ool enrolment Special				
	school Application a BbgSchulG	according to § 106				
Reference to school	l medical exa	amination				
Explanation of the s						
<u> </u>		nool admission letter				
After-school care is		iooi aaiiiissioii lettei				
		re centre registration				
procedure						
Planned after-school care centre	OI					
Remark						
		ents to the desired so tive schools! Otherwi				
Would you like to g	o to another s	school?	'es		No	
Submission by the res	nonsible school	- Signature / Date	Rece	int at the c	lesired school - 9	Signature / date