

# NEW STUDENT APPLICATION FORM GUIDE

This document will guide you through each part of the Student Application form and can be used as a reference if you have any questions about any of the individual form sections. The form will save changes each time you click “next” to advance the page, but you can also make sure it is saved by clicking on the circle at the top right of the screen and choosing “Save and log out”. So, after clicking next or saving, you can close the window and continue later. The next time you log into the form, you will be able to continue where you left off.

The “Dashboard” will show all your forms (started and completed) for all your family members.

The left menu title will always show the name of the applicant.

You can jump to a page directly by clicking on the menu on the left.

Click here to view account settings for the Registration website or to choose “Save and Exit.”

You can click on “help” to look for self-help options. For help from ICSB, write us at registrar@icsbudapest.org.

Click “Next” to quickly advance to the next page of the form.

The screenshot shows a web browser window with the URL <https://registration.powerschool.com/family/actionForms/index>. The page title is "New Student Application 2019-2020 (testlive)". The main heading is "Introduction" and "New Student Application". The left sidebar menu includes "Introduction", "Forms", "Applicant", "Contacts", "Emergency Contact Priority", "Siblings and Alumni", and "Medical". The main content area contains instructions: "Welcome to International Christian School of Budapest's New Student Application. Please follow the steps below to continue." and "1. Click 'Next' on this page, and enter the information requested by the online forms. Note: Required fields are marked as 'Required', and International Christian School of Budapest will receive the data exactly as it is entered. Please be careful of spelling, capitalization, and punctuation." At the bottom of the form, there are "Previous" and "Next" buttons. The top right of the page has "Dashboard", "Help", and a profile icon labeled "PI".

## INTRODUCTION PAGE

Please read the instructions on the Introduction page. Click “next” to start filling out the form.

## APPLICANT

This where you will confirm information about the applicant (student).

- **FIRST/MIDDLE/FAMILY NAME**  
The legal name of the applicant (the applying student's name, not the person filling out the form.) Must match legal documentation.
- **PREFERRED NAME**  
If the applicant uses a name other than his/her legal name, then you may indicate that here.
- **GENDER/DATE OF BIRTH/PLACE OF BIRTH**  
Must match legal documentation. Date can be typed in the predefined format or chosen from the drop-down calendar.
- **APPLYING FOR GRADE**  
Please choose the grade that the applicant will be entering next year or in the year you are applying for. (Do not enter their current grade)

## Nationality

- **CITIZENSHIP #1**  
Please choose the legal citizenship of the applicant. This should match the applicant's passport and/or legal documentation.
- **NATIONALITY**  
If the applicant identifies with a nationality other than the country where they have their citizenship, you may indicate that here, or choose the same as the citizenship.
- **WHAT IS THE APPLICANT'S LEGAL STATUS IN HUNGARY?**  
If you choose legal status pending, you will be required to submit this information later. We require legal documentation for the following reasons:
  - **HUNGARIAN PERSONAL IDENTIFICATION NUMBER** (Hungarians)  
We need this for reporting to the government and potentially for off campus travel.
  - **RESIDENCE PERMIT NUMBER AND EXP. DATE** (Non-Hungarians)  
We are required to report the legal status of all our non-Hungarian students.
  - **PASSPORT**  
For school trips, we will need to have passport numbers for all participating students.
- **CHECK HERE IF YOU ARE DUAL CITIZEN**  
If you have dual citizenship status, you may enter your second citizenship information here.

## Home/Residential Information

- **WHERE DOES THE APPLICANT CURRENTLY RESIDE?**  
Please indicate if the student resides locally in the county of the school, in Hungary but not in the same county, or outside of Hungary.
- **ADDRESS/CITY/STATE/COUNTRY/ZIP**  
The current residential address of the applicant.
- **FROM WHAT DATE WILL THE APPLICANT RESIDE AT A LOCAL ADDRESS?**  
If the applicant does not yet live in the same county as the school, please indicate when he/she plans to move to the area and start school.
- **HOME PHONE/STUDENT CELL PHONE**  
These fields are optional. If the applicant has a cell phone or home phone and would like the school to be able to contact them directly, you can enter that cell phone number here. This is not a phone number for family members or guardians, they will be able to add their numbers later in the form.

## Contacts

This is data for parents/guardians and emergency contacts. You will have a chance to set contact priority on the following page, so the order here is not of consequence. This section can be long, so be careful to match the correct information with the correct contact.

### Contact 1

- **FIRST NAME/FAMILY NAME**  
This is information for "Contact 1" of the student. Please enter the contact/parent's legal name.
- **NATIONALITY/CITIZENSHIP**  
Both fields may be the same. We would like to know the family background in order to better serve the needs of the parents and be sensitive to culture differences, etc.
- **GENDER**  
Should match legal documentation.
- **EMPLOYER**  
You may list the contact's employer or mission agency here.

## Contact 1 Relationship to the Student

- **RELATIONSHIP TO STUDENT**  
Please set the relationship for each contact.
- **CONTACT'S EMAIL SHOULD BE ADDED TO SCHOOL AND CLASS DISTRIBUTION LISTS?**  
This contact would like to receive any important mail related to the student. Usually, only parents or guardians should select this option.
- **HAS LEGAL CUSTODY OF STUDENT**  
Is this contact a legal guardian of the applicant?
- **HAS PERMISSION TO PICK UP THE STUDENT FROM SCHOOL**  
Does this contact have permission to pick up the applicant from school?
- **LIVES WITH STUDENT**  
Does this contact live in the same household as the student?

## Contact 1 Email and Phone

- **EMAIL ADDRESS**  
Please provide a current email address for legal guardians of the applicant.
- **PRIMARY PHONE COUNTRY CODE/ PRIMARY PHONE NUMBER**  
This is the primary phone number for contact 1 and is required. You must pick the country code from the drop-down list, and then enter the full number including the area code without spaces, hyphens, or parentheses.
- **PHONE 1 TYPE**  
Please select the correct phone type.
- **ADD ADDITIONAL PHONE NUMBER?**  
If the contact has multiple phone numbers you can check this box to add a second number with the same fields as the primary number.

## Contact 1 Physical/Residential Address

- **MAILING ADDRESS: ADDRESS, APT/UNIT/STE, CITY, STATE, ZIP CODE, COUNTRY**  
A mailing address is highly recommended required for contacts that the student may reside with.

## Contacts 2-7

Same process as contact 1. **We require 2 parent/guardian's contact information**, and strongly suggest a third emergency contact.

## EMERGENCY CONTACT PRIORITY

Here, you should see all the applicant's contacts (family and emergency). You can set what contacts should be a priority in case of an emergency. Setting priority is required for all contacts.

## Siblings and Alumni

- **SIBLINGS**  
Please List the Name/Birthday/and ICSB attendance status for each sibling. This information may be important for emergency situations and building access.
- **ALUMNI**  
Here you may optionally list any other alumni you may have in your family. This information is helpful for our alumnus program.

## Student's Medical Information

- **PHYSICIAN**  
If available, please give the full name and phone number of the applicant's family physician to contact in case of a health issue. For phone, you need to pick the country code from the drop-down list, then enter the full number including the area code without spaces, hyphens, or parentheses.
- **DENTIST**  
If available, please give the full name and phone number of the applicant's family dentist to contact in case dental related health issues. For phone, you need to pick the country code from the drop-down list, then enter the full number including the area code without spaces, hyphens, or parentheses.
- **DO YOU HAVE HUNGARIAN HEALTH INSURANCE?**  
Choose "Yes" if the applicant is covered by Hungarian State insurance and has a "TAJ" number. (TAJ number will be required.) In an emergency situation, the school may be required to provide this to a hospital or an ambulance.
- **DO YOU HAVE PRIVATE (NON-HUNGARIAN) HEALTH INSURANCE?**  
If the applicant has a private insurance plan, please choose "Yes" to this question. If "Yes", Insurance Company, and Policy Number will be required. In an emergency situation, the school may be required to provide this to a hospital or an ambulance.
- **DOES YOUR STUDENT HAVE ANY ALLERGIES?**  
If so, please list all allergies clearly and answer the follow-up questions.
  - **PLEASE LIST ANY ALLERGIES AND REACTIONS**
  - **IS YOUR STUDENT'S ALLERGY LIFE THREATENING?**
  - **DOES YOUR STUDENT HAVE AN EPIPEN?**
- **PLEASE LIST ANY MEDICATION TAKEN DAILY BY THE STUDENT**  
Any student carrying any type of medicine on campus needs to be reported to the school nurse. List any such medicines here or risk confiscation of the medicine.
- **LIST ANY MEDICAL INFORMATION THAT IS IMPORTANT FOR TEACHERS TO KNOW.**  
This information will be published for all the student's classroom teachers. This may include allergies, conditions that might require classroom interruptions, conditions that might limit class participation, as well as any conditions that may trigger an immediate medical emergency.
- **LIST ANY OTHER IMPORTANT MEDICAL DETAILS THAT WILL BE VIEWABLE BY THE HEALTH OFFICE STAFF ONLY.**  
Please list any other medical issues here that you would like to provide to the school nurse, but would not want to publish for the teachers..

## Behavior/Learning Needs

### Behavior Issues

These questions are to help us assess the psychological/emotional needs of the applicant and will not necessarily impact the acceptance or rejection of an application.

- **HAS YOUR CHILD EVER BEEN SUSPENDED, EXPELLED, OR WITHDRAWN BY A SCHOOL FOR ANY REASON?**
- **HAS YOUR CHILD EVER HAD ANY CONDUCT OR DISCIPLINE PROBLEMS?**
- **HAS YOUR CHILD EVER HAD ANY INVOLVEMENT WITH DRUGS OR ALCOHOL?**
- **HAS YOUR CHILD EVER BEEN BROUGHT BEFORE A JUVENILE COURT OR LAW ENFORCEMENT AGENCY?**

## Learning Needs

These questions are important in assessing the learning needs of each applicant. ICSB has a program to address learning needs and we need as much information as possible to create a learning needs plan for each student that we accept. Also please provide us with any diagnosis or official documents related to this. Later in the Downloads page, you will have a chance to upload a complete plan if they have one from a previous school.

- **DOES YOUR CHILD HAVE ANY HISTORY WITH SPECIFIC LEARNING DISABILITIES OR OTHER HEALTH IMPAIRMENTS (E.G. DYSLEXIA, DYSCALCULIA, DYSGRAPHIA, OR ATTENTION DEFICIT/HYPERACTIVITY DISORDER (ADHD))?**
- **DOES YOUR CHILD HAVE ANY HISTORY WITH SOCIAL, EMOTIONAL, OR BEHAVIORAL DISORDERS (E.G. CONDUCT DISORDER, OBSESSIVE-COMPULSIVE DISORDER (OCD), ANXIETY, DEPRESSION, ETC.)**
- **DOES YOUR CHILD HAVE ANY HISTORY OF DEVELOPMENTAL DISABILITIES (E. G. AUTISM SPECTRUM DISORDER (ASD), CEREBRAL PALSY, DOWN SYNDROME, INTELLECTUAL DISABILITY, ETC.)?**
- **HAS YOUR CHILD EVER BEEN ENROLLED IN A SPECIAL EDUCATION PROGRAM OR SPECIAL SERVICES (I.E. PULL-OUT CLASSES, RESOURCE ROOM, SPEECH THERAPY, OCCUPATIONAL THERAPY, MOVEMENT THERAPY, THERAPY FOR LEARNING DISABILITIES OR ADHD, ETC.)?**
- **DOES THE APPLICANT TAKE MEDICATION FOR LEARNING CHALLENGES OR ATTENTION DEFICIT/HYPERACTIVITY DISORDER?**

## English Language Learning

- **IS THE APPLICANT A NATIVE ENGLISH SPEAKER?/ PLEASE DESCRIBE THE APPLICANT'S APPROXIMATE PROFICIENCY LEVEL IN ENGLISH**

By answering this question to the best of your knowledge, we can determine how much additional English language assistance may be required for the applicant to succeed in our program. Further assessment may be required in some cases.

- **PLEASE LIST ALL OTHER LANGUAGES (OTHER THAN ENGLISH) THAT THE APPLICANT SPEAKS FLUENTLY.**
- **WHAT LANGUAGE DOES THE FAMILY SPEAK AT HOME MOST OF THE TIME?**

For multi-language households, this helps us understand language background and estimate language needs better.

## School Information

### Current and Prior Education

Contact and reference information for your current/previous school. Transcripts will be provided later on the Downloads page.

- **IS THE APPLICANT CURRENTLY ENROLLED IN SCHOOL OR PRESCHOOL?**

Please only answer "no" if enrolling to pre-first or first grade.

- **NAME OF SCHOOL/STREET ADDRESS/CITY/STATE/COUNTRY/ZIP**  
Name and address of your current/most recent school.
- **SCHOOL PHONE**  
Please provide a phone number for the school.
- **CURRENT GRADE**  
The current grade of the applicant, or last grade completed.
- **DATE ENTERED**  
This is the first day that the applicant attended the school listed above.

- **TEACHER REFERENCE FULL NAME/EMAIL ADDRESS/PHONE NUMBER**

We require one current teacher reference from your current school, which we will send to them. Their email address is required.

- **PRINCIPAL/ADMINISTRATOR REFERENCE FULL NAME/EMAIL ADDRESS/PHONE NUMBER**

We require one administrator reference from your current school, which we will send to them. Their email address is required.

- **HOW MANY OTHER SCHOOLS HAS THE APPLICANT ATTENDED?**

For each previous school attended, you will be asked to provide the following information:

- **NAME OF SCHOOL/CITY/STATE/COUNTRY**

Name and address of the previous school

- **DATES ATTENDED**

Please put the date of entry and exit for the listed school.

## Applicant Questionnaire

- **HOW DID YOU HEAR ABOUT OUR SCHOOL?**

Please let us know how you discovered our school. This information is very helpful in promotion of our school.

- **PLEASE COMMENT ON THE APPLICANT'S TALENTS, FAVORITE ACTIVITIES OR PERSONAL INTERESTS.**

We have a number of extra-curricular programs available to students, and this helps us get to know the applicant and gauge possible interest in our programs. This also helps us plan for any activities that may conflict with school activities.

- **WITH WHICH RELIGION DOES THE FAMILY (PARENTS/GUARDIANS) IDENTIFY?/ PLEASE BRIEFLY DESCRIBE YOUR (THE APPLICANT'S) PERSONAL RELIGIOUS BELIEFS, IF ANY.**

Because our school has a distinctly Christian approach, an environment which we strive to preserve, we ask several questions on religious affiliation. However, it is not required for the student or parents to identify as Christians to gain admittance. We would like to be aware of any potential conflict in the area of religion and strive to be sensitive and respectful of the applicant/family's religious beliefs. Although these questions are optional, we strongly encourage applicants/families to answer these questions if possible.

## Document Uploads

- **UPLOAD TRANSCRIPTS/REPORT CARDS**

Please Upload Transcripts that cover a minimum of the last 4 years of school, or since the applicant started school. These documents should be submitted in the PDF file format.

- **UPLOAD YOUR PHOTO**

Please upload an ID photo of the applicant. This Photo can be in JPG or PNG file format.

- **UPLOAD STANDARDIZED TEST SCORES (IF AVAILABLE)**

If the applicant has any Standardized Test Scores, please upload them here. (Examples: ISEE, SSAT, MAP, SAT, ACT. etc...)

- **UPLOAD SPECIALIZED EDUCATION PLAN**

If the applicant is or was following a specialized education plan, please upload a copy of that plan here. A specialized education plan details supplementary services received by the applicant related to learning needs. Please submit this plan in the PDF file format.

- **UPLOAD IMMUNIZATION RECORDS**

Standard immunizations are required in Hungary and by our school. Please upload a copy of the applicant's past immunization records. Proof of immunization will be required by our nurse before the applicant would be allowed to attend school. Please submit these records in the PDF file format.

## Agreements

If the applicant is accepted, we require a signed agreement between the school and legal guardians to provide educational services. This is in accordance with Hungarian and European law. On this page, you can look at the education agreement and other consent forms before submitting the form. These agreements will need to be signed later in person, if the applicant is admitted. You will be given instructions later as to how and when to do this. If you wish, you may read through and/or download these documents.

- **I ACKNOWLEDGE THE RESPONSIBILITY FOR BOTH PARENTS TO PERSONALLY SIGN THE EDUCATION AGREEMENT AND TO REVIEW THE OTHER CONSENT FORMS, AND THAT CONTINUED ENROLLMENT IS CONDITIONAL UPON THIS.**

Choose "Yes" to indicate you have been given opportunity to review these documents and understand that you will need sign them.

## ELECTRONIC SIGNATURE

- **I AGREE**

Choose "Yes" to affirm that you have filled everything out to the best of your knowledge and to give us permission to process the application within the allotted amount of time.

- **ELECTRONIC SIGNATURE**

The name of the person filling out the form.

- **TODAY'S DATE**

You can type the date in the correct format or choose from the drop-down calendar.

## REVIEW

Here, you may review the entire form and everything you are submitting. If you have missed required fields, the system will indicate them here and will give a chance to go back to the page where you have missing data. Once redirected to appropriate page, the page will have the missing data highlighted in red. Once you have filled in all missing data, you can go back to the "Review" page to see if there is any additional data missing. Please be patient as this often takes several passes to find all the missing data. If you are unable to move beyond this page and are unable to find the missing data, you may contact us at [registrar@icsbudapest.org](mailto:registrar@icsbudapest.org) to find options for assistance. Please indicate what email address your Registration account was signed up with.

## PAYMENT AND SUBMIT

You will be unable to submit the form unless payment is made, or a waiver code is entered.

- **SELECT A PAYMENT METHOD**

- Credit Card

We would encourage everyone to pay with a credit card if possible. If you choose to pay with a credit card, additional fields will appear to enter credit card information. PowerSchool will process the payment and provide a bill.

- Waiver

A "Waiver" code does not waive you from paying the fee, only from paying online. You will still need to pay the fee in person, or through other means. Please contact [busmgr@icsbudapest.org](mailto:busmgr@icsbudapest.org) if you are unable to pay with credit card and they will arrange another method of payment. A waiver code will be issued once payment has been made.

- **SUBMIT**

Once all required information is entered and payment is confirmed, the submit button will be available and you can submit the form. Once submitting the form, you will be unable to change it.

## NEXT STEPS

Here you have a chance to:

1. Print/save your submitted form for your own records.
2. Review and track additional steps of the application process.
3. Schedule a Campus Visit electronically if available. (Please be aware that this feature may not always be available and you can email [registrar@icsbudapest.org](mailto:registrar@icsbudapest.org) to schedule school visits.)
4. Move directly on to the next child in your family. In this case, the system will copy over certain family data to save time.

When you are finished with the form and would not like to continue a new one, you may log out by clicking on the circle in upper right corner and selecting "save and logout". Submitted form data will continue to be available under your Registration account. You may login anytime to look at records or track status.