



The personal data you provide will be used to provide the support and service we are responsible for. Grums Municipality is responsible for processing your personal data in accordance to the data protection legislation. Read more at www.grums.se/personuppgifter.

Student's personal information

Name	Personal Identity Number	
School	Class	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Please indicate the native language which the pupil wishes to study	Enter any variation or information pertaining to the language	

Personal Information of the first guardian

Name	Personal Identity Number
Address	Telephone
Postal address	Mobile number

Personal Information of the second guardian

Name	Personal Identity Number
Address	Telephone
Postal address	Mobile number

To be filled in by the guardian

The student's parents / guardians speak the mother tongue language	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The mother tongue language is used daily by the student at home	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the student have basic knowledge of the language?	<input type="checkbox"/> Yes	<input type="checkbox"/> No



Guardians' signature

Place and date	Place and date
Signature	Signature

To be filled in by the principal

The pupil has the basic knowledge of the mother tongue language	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Principal's Signature

Place and date
Signature

The form must be sent to: Grums kommun, 664 80 Grums