

## **School Transport Services LLC**

STS-SD-M-01-F-01

## **Student Registration**

School Name:			
Name of Student:			Upload Photograph
Student ID No.:			(JPEG format)
Grade / Year:	Section:	Nationality:	
Date of Birth:DD/MM/YY		Gender:	
Service Start Date:	Medica	l Condition / Allergy (	if any):
RESIDENCE DETAILS:			
Emirate:	<i>_</i>	Area:	
Nearest Landmark / Pick-u	ıp Point:		
Location Latitude (X):	I	ocation Longitude (Y	):
Parent / Guardian Name:			
P. O. Box: Hous	se / Building / Villa No.: _	Street:	
Makani No.:	(Issued by Dubai	Municipality / Applicable o	nly for the Emirate of Dubai.)
E-mail:	A	Ilternate E-mail:	
Office No.:	Residence No.:	Emergency	No.:
Father's Mobile:		Mother's Mobile:	
I have read and understood and agree to the clauses st		ons (STS-SD-M-01-F-02) of	School Transport Services LLC (STS)
-			r Office Use Only
			ef No.:
		Bu	ıs No.:
Parent's Signature	Date	Da	ate: