



2022/2023 Sibling Priority Transfer Form

Important: Please fill out a **separate form for each sibling** that you are requesting a transfer for.

First Name: _____ Last Name: _____

Current Campus: Gharaffa Madinat Khalifa Themaid

Current Year Group: _____ Teacher: _____

For the 2020/2021 Academic Year we would like to move our child to:

 Gharaffa Madinat Khalifa Themaid

Reason for move:

Please sign and return to the Admissions Officer at your current school campus or scan and send to admissions.cisd@nais.qa.

For school use only

Date request received: _____ Received by: _____

Head of Current Campus:

 Approved Not Approved

Signature: _____ Date: _____

Head of Requested Campus:

 Approved Not Approved

Signature: _____ Date: _____