

**IB Application Form**

**Per Brahegymnasiet**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student info.** | | Family name | | | | | | Address: | | | |
| First name(s): | | | | | | Postal code: | | | |
| Swedish personnummer/date of birth: | | | | | | City: | | | |
| Nationality: | | | | | | Country: | | | |
| Years of learning experience in English: | | | | | | Phone: | | | |
| Mother tongue: | | | | | | Email: | | | |
| Language spoken at home: | | | | | | Current school: | | | |
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|  | |  | | | | | |  | | | |
| **Mother/Guardian** | | Family name | | | | | | Address: | | | |
| First name(s): | | | | | | Postal code: | | | |
| Nationality: | | | | | | City: | | | |
| Phone: | | | | | | Country: | | | |
| Email: | | | | | |  | | | |
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| **Father/Guardian** | | Family name | | | | | | Address: | | | |
| First name(s): | | | | | | Postal code: | | | |
| Nationality: | | | | | | City: | | | |
| Phone: | | | | | | Country: | | | |
| Email: | | | | | |  | | | |
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| **NB** | | We must receive information regarding special challenges (physical, psychological, | | | | | | | | | |
| learning-related) that could influence the education of the applicant. Copies of documentation, | | | | | | | | | |
| references from doctors or the like should be attached and will be treated in full confidence | | | | | | | | | |
| and destroyed if the application is withdrawn. | | | | | |  | | | |
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| **Please choose your subjects below - 3 at Higher Level and 3 at Standard Level.** | | | | | | | | |
| **Choose one subject from Groups 1-5.** | | | | | | | | |
| **Choose a sixth subject from Groups 2-4.** | | | | | | | | |
| **It is possible to have two subjects in Group 1 and none in Group 2.** | | | | | | | | |
|  | | | | | | | | |
|  |  | | **Subject** | **SL** | **HL** | | | |
| **Group 1** | **Language A** | | Swedish |  |  | | | |
|  |  | | English |  |  | | | |
|  |  | | Native language - self taught |  |  | | | |
|  |  | |  |  |  | | | |
| **Group 2** | **Language B** | | English B |  |  | | | |
|  |  | | Swedish B |  |  | | | |
|  |  | |  |  |  | | | |
|  | **Language ab initio** | | Swedish ab initio |  |  | | | |
|  |  | |  |  |  | | | |
| **Group 3** | **Individuals** | | Economics |  |  | | | |
|  | **and Societies** | | History |  |  | | | |
|  |  | | Psychology |  |  | | | |
|  |  | |  |  |  | | | |
| **Group 4** | **Experimental** | | Biology |  |  | | | |
|  | **Sciences** | | Chemistry |  |  | | | |
|  |  | | Physics |  |  | | | |
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| **Group 5** | **Mathematics** | | Applications & Interpretations |  |  | | | |
|  |  | | Analysis & Approaches |  |  | | | |
|  |  | |  |  |  | | | |
| **Group 6** | **Extra subject** | | Write here: |  |  | | | |
|  | **from Group 2, 3 or 4** | |  |  |  | | | |
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| **Please note: Per Brahegymnasiet cannot guarantee that all of your choices can be met. There** | | | | | | | | | |
| **must be a certain number of students that choose the course. We will also look at the student** | | | | | | | | | |
| **choices to determine which subjects will be blocked in order to create a good schedule** | | | | | | | | | |
| **for the class.** | | | | | | | | | |
| **Required documents** | | | | | | |  | | | |
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| 1. Most recent report card | | | | | | |  | | | |
| 2. Personal statement (apporoximately 500 words about yourself and your motivation for applying | | | | | | | | | | |
| to PreIB at Per Brahegymnasiet.) | | | | | | |  | | | |
| 3. Photocopy of your Swedish passport, Swedish national residence card or an explanation of when | | | | | | | | | | |
| these will be available to you. | | | | | | |  | | | |
| 4. Information regarding special challenges that could influence the education of the applicant. | | | | | | | | | | |
| Copies of documentation/references from doctors should be attached and will be treated in full | | | | | | | | | | |
| confidence and destroyed if the application is withdrawn. | | | | | | |  | | | |
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| **Contact information** | | | | | | |  | | | |
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| Please email the application, including the required documents to Janine.bokor@jonkoping.se | | | | | | | | | | |
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| Janine Bokor | | | | | | |  | | | |
| IB Diploma coordinator | | | | | | |  | | | |
| Per Brahegymnasiet | | | | | | |  | | | |
| Residensgatan 7 | | | | | | |  | | | |
| 55316 Jönköping | | | | | | |  | | | |
| Sweden | | | | | |  |  | | | |
| Tel: +46 36103810 | | | | | | |  | | | |
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| The deadline for applications is April 1. | | | | | | |  | | | |
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| Late applications may be considered. | | | | | | |  | | | |
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| **Date** | |  | | | | | |  | | | |
|  | |  | | | | | |  | | | |
| **Signature** | |  | | | | | |  | | | |