



IB APPLICATION

To be used by applicants directly entering the two year IB diploma programme



PERSONAL DATA

Name of applicant:		ID no/D.O.B.:
Address (name of street):		
Post code:	City:	
Phone:	E-mail(required):	Nationality:
Present/previous school:		Class/grade:

PARENT/GUARDIAN

Name(s):	
Address (name of street):	
Post code:	City:
Phone:	E-mail (required):

SUBJECT CHOICES (Choose one subject from each group – 3HL + 3SL or 4HL + 2SL)

Level	Group 1	Group 2	Group 3	Group 4	Group 5	Group 6
Higher Level (HL)	<input type="checkbox"/> Icelandic A <input type="checkbox"/> English A	<input type="checkbox"/> English B <input type="checkbox"/> French B <input type="checkbox"/> German B <input type="checkbox"/> Spanish B <input type="checkbox"/> Danish B	<input type="checkbox"/> History <input type="checkbox"/> Psychology (DP online)	<input type="checkbox"/> Biology <input type="checkbox"/> Chemistry <input type="checkbox"/> Physics	<input type="checkbox"/> Math Methods	<input type="checkbox"/> Visual arts <input type="checkbox"/> Extra subject from groups 2–4 (Tick appropriate subject box)
Standard Level (SL)	<input type="checkbox"/> Icelandic A <input type="checkbox"/> English A <input type="checkbox"/> Self-taught language: _____	<input type="checkbox"/> English B <input type="checkbox"/> French B/ABi <input type="checkbox"/> German B/ABi <input type="checkbox"/> Spanish B/ABi <input type="checkbox"/> Danish B	<input type="checkbox"/> History <input type="checkbox"/> Psychology (DP online)	<input type="checkbox"/> Biology <input type="checkbox"/> Chemistry <input type="checkbox"/> Physics	<input type="checkbox"/> Math Methods <input type="checkbox"/> Math Studies	<input type="checkbox"/> Visual arts <input type="checkbox"/> Extra subject from groups 2–4 (Tick appropriate subject box)
Additional subject (optional):						

MATERIAL ATTACHED/ENCLOSED

<input type="checkbox"/> Two latest school reports (required)
<input type="checkbox"/> Reference from a former teacher/s or others (appreciated)
<input type="checkbox"/> Applicant's own presentation (1/2-1 page, explaining why IB is chosen, students' strengths/weaknesses etc.)
<input type="checkbox"/> Other:

SIGNATURES

Applicant + date	Parent/guardian + date
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Mail or e-mail to our school **no later** than the given deadline on www.menntagatt.is:
 IB coordinator, Hamrahlid College, Hamrahlid 10, 105 Reykjavík, ICELAND (www.mh.is, ibstallari@mh.is)
Students with Icelandic ID number also need to apply on www.menntagatt.is.