**Application Date:**

0

**Application No.**

******Licensing Application Form to Establish Early Childhood Education Institution (Nursery (**

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| **Applicant Data** | | | |
| Surname | Middle Name | First Name | **Full name of applicant (owner/legal representative)** |
|  | | | **Name of company/ organization/ institution**  **In case the owner is company/organization /institution please provide name.** |
|  | **License No. (for institution or company)** |  | **Nationality** |
|  | **Passport number** |  | **CPR** |
|  | **Job title** |  | **Date of birth** |
|  | **Contact No. (mobile)** |  | **Resident address** |

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| **Institute Data** | | | |
|  | | | **ECE proposed institute name** |
| **Institute Type** | | | |
| **Communities Foreign National** | | | |
| **Normal Special needs** | **Children's categories** |  | **Proposed area in Kingdom of Bahrain** |
|  | **Official working hours** |  | **Expected children capacity** |
| **Education Languages** | | | |
| **Arabic English Others**  1  1 | | | |
|  | **Funding source** |  | **Cost of institution establishment** |
| **Yes No** | **Have you previously applied for ECE license?** |  | **Expected children Fees** |
|  | **Closing date (if available)** | **Yes No** | **Has your ECE institution been previously closed?** |
| **If your ECE institution has been previously closed, give the reasons:** | | | |

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| **Academic Qualifications of Applicant (Starting with Last Qualification)** | | | |
| **Country** | **Year of Graduation** | **Academic Qualification** | **No.** |
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| **Education and Training Work Experience of Applicant or their Representative** | | | | |
| **Awarding Body** | **To** | **From** | **Areas of Expertise** | **No.** |
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| **Information of Suggested Employees** | | | | | |
| **Suggested Salary in BHD** | **Qualification** | **Nationality** | **Number** | **Job Title** | **No.** |
|  |  |  |  |  | **1** |
|  |  |  |  |  | **2** |
|  |  |  |  |  | **3** |
|  |  |  |  |  | **4** |
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| **Acknowledgment That Data Provided in This Application Is Correct** | | |
| **I hereby declare that information provided is true and correct. I also understand that any willful dishonesty may render for refusal of this application or immediate termination.** | | |
| **Date:** | **Signature:** | **Name:** |

|  |  |  |  |  |
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| **No.** | **Required Documents** | **Special For Early Education Licensing and Follow-Up Department** | | |
| **Available** | **Not Available** | **Comment** |
| **1** | **Copy of valid passport.** |  |  |  |
| **2** | **CPR from both sides and data from Statistics Authority.** |  |  |  |
| **3** | **High school diploma and last academic qualification of applicant** |  |  |  |
| **4** | **Statement from last job stating that applicant has left his job if he is an employee release.** |  |  |  |
| **5** | **Feasibility study and estimated budget for the institution.** |  |  |  |
| **6** | **Bank certificate of amounts allocated for the capital of the institution (10 thousand dinars)** |  |  |  |
| **7** | **Two copies of the proposed educational curriculum.** |  |  |  |
| **8** | **Institution internal regulation.** |  |  |  |
| **9** | **Document of proposed building if the building is available.** |  |  |  |
| **10** | **Notarized partnership contract if two or more persons participation.** |  |  |  |
| **11** | **If applicant is a legal person, a copy of the establishment or company registration certificate at the Ministry of Industry, Commerce and Tourism should be attached.** |  |  |  |

**Your Early Childhood Education Philosophy**

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| 1. **Reasons why you want to invest in Early Childhood Education (ECE):** |
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| 1. **Vision and philosophy of your ECE institution:** |
| **.............................................................................................................................................................................................................................. ..............................................................................................................................................................................................................................**  **..............................................................................................................................................................................................................................**  **…………………………………………………………………………………………………………………………………………………………………………………………………….** |
| 1. **Mission of your ECE institution:** |
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| 1. **In brief, please explain how your vision and philosophy will be implemental to ensure successful outcomes on children:** |
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| 1. **How will the institution’s activities and services be able to attract parents to enroll their children in ECE?** |
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| 1. **If your institution is all inclusive, how will its activities and services be able to attract children with special needs and enhance their capabilities?** |
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**Early Learning Foundation Philosophy**

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| 1. **What makes your ECE institution unique and different?** |
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| 1. **How will your institution contribute to the ECE sector in the kingdom of Bahrain?** |
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