

Registration form

You will receive the access code at the primary school if you wish to register online



Registration to attend a secondary school of general education at secondary level I for the 2026/2027 academic year in the state of Brandenburg

1. Student	
First name	Gender <input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> non-binary
Surname	
Date of birth	
Student's home address	

2. Legal guardians	
1st legal guardian	2nd legal guardian
First name	First name
Surname	Surname
Home address (if different from the child's address)	Home address (if different from the child's address)
Telephone number	Telephone number
Email address	Email address

3. Details of previous schooling
Name and location of the school attended to date (school stamp - blue stamp ink, no copies)

4. Desired course of study (BG) ¹
<input type="checkbox"/> EBR <input type="checkbox"/> FOR <input type="checkbox"/> AHR

5. Preferred state school
First choice school
Second choice school

¹ EBR - Extended vocational training qualification (extended secondary school leaving certificate),
FOR - Vocational extension certificate (secondary school leaving certificate/intermediate school leaving certificate)
AHR - General higher education entrance qualification (Abitur)

6.	6. Preferred <u>independent</u> school	
	Please fill in the details on page 3 if you would like to attend an independent school.	

7.	7. Preferred elective subject at a secondary school or comprehensive school, or preferred foreign language at a grammar school from Year 7 onwards	
	<p>If applying for a comprehensive school or secondary school, a compulsory elective subject² must be ticked.:</p> <p><input type="checkbox"/> Economy, labour, technology</p> <p><input type="checkbox"/> Natural sciences</p> <p><input type="checkbox"/> Second foreign language (preferred):</p> <p style="margin-left: 40px;">_____</p> <p style="margin-left: 40px;"><input type="checkbox"/> I am also fine with another foreign language.</p> <p><input type="checkbox"/> Additional approved elective subject:</p> <p style="margin-left: 40px;">_____</p>	<p>When applying for a grammar school, you must tick a box indicating your preferred foreign language:</p> <p><input type="checkbox"/> Second foreign language (preferred):</p> <p style="margin-left: 40px;">_____</p> <p style="margin-left: 40px;"><input type="checkbox"/> I am also fine with another foreign language.</p>

8.	8. Native language teaching <i>(only for students with a migrant background)</i>	
	My native language is: _____	
	<input type="checkbox"/> I would like to participate in additional native language lessons.	

9.	9. Existence of a case of special hardship or other special reason <i>(Please submit the supporting documentation as an attachment)</i>	
	<p>I/we are claiming <u>special hardship</u> (please tick the applicable box)</p> <p><input type="checkbox"/> in accordance with § 53 para. 4 of the academic legislation of Brandenburg (BbgSchulG)</p> <p><input type="checkbox"/> other</p> <hr/> <p>I/we are claiming a <u>special reason</u> (please tick the applicable box)</p> <p><input type="checkbox"/> in accordance with § 53 para. 6 of the academic legislation of Brandenburg (BbgSchulG)</p> <p><input type="checkbox"/> other</p>	

10.	10. Comments/requests³	

	Place, date	Signatures of legal guardians <i>(in blue)</i>	

² Schools offer an additional (approved) compulsory elective subject in individual cases, but this cannot be claimed as a special reason.

³ Only applies to students who wish to attend an approved grammar school class at a comprehensive school..

Information for the State Education Authority regarding the selection of an independent school for the 2026/2027 academic year

→ Information:

This page 3 must only be filled out, signed and submitted to the primary school currently being attended if the preferred school is an independent school.

Registration at the school is carried out independently of this information by the legal guardians directly at the preferred independent school.

I/we would like to inform you that my/our child

.....
(First name and surname)

intends to attend the **following independent school**.

.....
.....
.....
.....
(Name and address of the independent school)

Please tick where applicable:

<input type="checkbox"/>	I/we hereby declare that my/our child does not require a place at a state school due to my/our choice of an independent school. ⁴
<input type="checkbox"/>	I/we have already concluded a contract with the independent school operator.
I/we hereby declare that I/we will immediately send the confirmation of enrolment at the independent school mentioned above to the relevant state education authority.	

	Place, date	Signatures of legal guardians (in blue)	

⁴ Your registration will be considered in the state school procedure if you have **not** ticked this box.