

## Nursery License application form for Individuals & Companies W.L.L

Please specify type of institution  Individuals  Companies W.L.L

### Applicant for a License Details

Licensee's Name <input type="text"/>	ID number <input type="text"/>
Phone number <input type="text"/>	Submission date <input type="text"/>
Qualifications <input type="text"/>	Job <input type="text"/>
E-mail Address <input type="text"/>	P.O. Box <input type="text"/>

### For Companies only (In case of partners)

Name	ID Number	Nationality	Partnering ratio	Mobile number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Nursery Director Details

Name of Nursery director <input type="text"/>			
Nationality <input type="text"/>	ID Number <input type="text"/>	Type of sponsorship <input type="text"/>	
Mobile number <input type="text"/>	Qualifications <input type="text"/>		
Previous job <input type="text"/>	Years of experience <input type="text"/>		
E-mail Address <input type="text"/>	P.O. Box <input type="text"/>		

### Nursery Details

Proposed name for nursery <input type="text"/>				
Address of the Nursery:		Municipality <input type="text"/>	Area <input type="text"/>	Street name <input type="text"/>
Zone Number <input type="text"/>	Street number <input type="text"/>	Building number <input type="text"/>		
Property type <input type="text"/>	Landlord's name <input type="text"/>	owned <input type="checkbox"/>	rented <input type="checkbox"/>	

### Enclosure:

- 1- Copy of licensee and partners' IDs.
- 2- Copy of licensee and partners' qualifications, if any.
- 3- Copy of Nursery director's ID Number.
- 4- Copy of Nursery director's qualifications.

**Nursery License application form  
for Individuals & Companies W.L.L**

Nursery Vision

Nursery Mission

Proposed activities & programmes

Proposed educational curriculum

Acknowledgement and Commitment

I .....

Holder of ID Number  address:

Phone number

I acknowledge that all documents and information attached are valid and I am fully responsible for them, & that the Family Affairs Department does not bear any legal responsibility regarding this information.

I also undertake to practice no activity in the nursery only after the license to open the nursery is granted by the Ministry of Administrative Development, Labour and Social Affairs as the commercial register is only one of the documents needed to complete the process of opening the nursery.

Date

Signature: