



2026 – 2027 School Year

Application for Grade

Child Details

Family Name: First Name:

Date of birth: /..... /..... Country of birth: Gender: Male / Female

Address:

Nationality:

Previous school:

Previous Grade:

Contact details

Father:

Family Name:

First Name:

Address:

.....

Nationality:

Occupation:

Employer:

Work phone:

Whatsapp phone:

Mobile phone:

Email:

Mother:

Family Name:

First Name:

Address:

.....

Nationality:

Occupation:

Employer:

Work phone:

Whatsapp phone:

Mobile phone:

Email:

ZUKA Partners Limited, BRN: C18159838, Château La Mare Ronde, Avenue Du Château,
Chemin Vingt Pieds, Grand Baie, Mauritius, E-Mail: office@seis.mu, Web: www.seis.mu
Phone: +230 268 0108

V. 06.12.25



Legal guardian: Father and Mother / Mother / Father

Legal status: Married / Divorced / Separated / Others

Number of sisters and brothers:

Covenant

I

The father:

The mother:

Hereby testify that:

- I am in good standing with the Mauritian authorities,
- I hold parental authority for the enrolment of my child at Antoine de Saint Exupéry school,
- I will notify the administration in writing in the event of any changes in my life situation (administrative, family, etc.),
- I have read and accepted the school rules and involved financial obligations
- I have provided no false statements and that in doing so it may result in the immediate expulsion of the student from the school.

Date:

Signature of father:

Signature of mother:

Required documents:

- Copy of birth certificate
- Copy of vaccination certificate
- Certificate of cancellation of previous school
- Proof of Residence and work permit for children and parents
- Copy of passport (child and parents)
- 2 passport sized photos



Parents and children must comply with the school's internal regulations. Each parent is required to sign a copy of the school rules. The latest copy of the school rules can be requested at SEIS's offices at any time.

Once application forms have been submitted, the deposit payment (corresponding to 2 months of school fees, refundable when the child leaves the school) and the initial registration fee (non-refundable) are due. Registrations will only be processed and confirmed after receipt of payment.

Authorization in case of an emergency:

In case of emergency, injured or sick students may need to be transported by ambulance to the closest available hospital. SEIS guarantees that parents will be immediately notified by phone. In the event of such emergency, I authorize the personnel of SEIS to take all necessary measures to provide help.

Date:

Signature:

Please specify below the name of the person that needs to be notified in case of emergency (if possible also a person that is not one of the parent), including their correct telephone numbers:

Person 1:

Person 2:

Person 3:



Pricing

INITIAL REGISTRATION FEE (NON-REFUNDABLE)

MUR 40,000

ANNUAL TUITION FEES

MUR 222,000

Including insurance and all necessary school supplies during the year, including books.

Payable over 12 months from September 2026 to August 2027, i.e. 12 monthly instalments of MUR 18.500.

5% reduction for any one-time payment made on August 31.

10% discount for families with 3 or more children attending to our school.

REFUNDABLE DEPOSIT

MUR 37,000

A deposit fund (equivalent to 2 months' tuition) will be required when your child registers. This deposit will be returned to you when your child leaves our school. It is required to make a written request to SEIS 2 months before your departure.

Please make required payments by bank transfer or cash.

Our bank details in your preferred currency can be found on the next page. All payments should be directed to ZUKA Partners Limited as the legal owner of Saint Exupéry International School, Mauritius.



BANK DETAILS: Account owner “ZUKA Partners Limited” – legal entity of SEIS

MUR

The Mauritius Commercial Bank Limited (MCB)

Account number 000447808877

Unit C1-01, La Croisette Commercial Complex, Grand Baie Branch

Absa Bank (Mauritius) Limited

Account number 132001030

La Croisette Commercial Complex, Grand Baie Branch

EUR SWIFT

MU41BARC0307000002052765000EUR, SWIFT BARCMUMUMAF

Absa Bank (Mauritius) Limited

1st Floor, Absa House, 68, Cybercity, Ebene, Mauritius

EUR SEPA

IBAN BE58967035978979, BIC TRWIBEB1XXX

Wise, Rue du Trône 100, 3rd floor Brussels 1050 Belgium

ZAR SWIFT

MU25BARC0307000002054296000ZAR, SWIFT BARCMUMUMAF

Absa Bank (Mauritius) Ltd, 1st Floor, Absa House, 68, Cybercity, Ebene, Mauritius

USD

Account number 8312124474, ACH and Wire routing number 026073150, Account type Checking

Community Federal Savings Bank, 89-16 Jamaica Ave, Woodhaven NY 11421, United States

GBP

Account number 52387876, UK SORT CODE 23-14-70

Wise Payments Limited, 56 Shoreditch High Street, London, E1 6JJ, United Kingdom

CHF

GB64TRWI23147052387876, TRWIGB2LXXX

Wise Payments Limited, 56 Shoreditch High Street, London, E1 6JJ, United Kingdom

AED

GB64TRWI23147052387876, TRWIGB2LXXX

Wise Payments Limited, 56 Shoreditch High Street, London, E1 6JJ, United Kingdom

AUD

Account number 209993404, BSB CODE 774001

ZUKA Partners Limited

SGD

Account number 208-098-4, Bank Code 0516

Wise Asia-Pacific Pte. Ltd. (Formerly TransferWise)

1 Paya Lebar Link #13-06 - #13-08 PLQ 2, Paya Lebar Quarter, Singapore 408533

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2026 - 2027 School year

School rules acceptance

Hereby testify that I have read and accept the school rules including all financial obligations

Name :

Date :

Signature :



Use of photos / videos of your child

As part of our pedagogical work, we will use photos/videos of the children of our school (for the purpose of school newspaper, the website, facebook and in other various media).

Under the rules of protection for minors, we will not reference any information that could directly or indirectly identify children or their families. Any use of images or footage is for non-profit only.

We are required by law to have written permission from the parents. Otherwise we will ask your child to not participate on group photo shootings or mask the face by means of photo or video editing.

We, the legal representatives of:

Allow/ do not allow

the school teachers to use photos/videos of our child taken during school activities in the mentioned publications and media.

Date

Signature



MEDICAL FORM

SCHOOL YEAR 2026 - 2027

Family Name:

First Name:

Date of birth:

Grade:

Family address:

Father	Mother
Phone at work:	Phone at work:
Mobile Phone:	Mobile Phone:
Phone at home:	Phone at home:

Child's medical history (allergy, asthma, etc.):

.....

.....

.....

Current state of child's health

- Regular drug treatments:

.....

- Speech and language therapy or psychological treatments:

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- Other notes:

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