

Please attach recent photos here (taken within the past six months)
6 个月内近照



CONCORDIAN
INTERNATIONAL SCHOOL
INTEGRITY • VISION • INTELLECT • COMPASSION

918 Moo 8, Bangkaew, Bangplee, Samutprakarn 10540
Tel: 02-706-9000 Fax: 02-706-9001
Email: enquiries@concordian.ac.th

APPLICATION 入学申请

Father
父

Mother
母

Student
学生

Documents to be submitted with this application 所需材料 (为顺利进行申请程序, 请务必递交以下所有相关材料)

- The last two school reports (if applicable) 最近两年成绩单 A copy of parents' ID cards (Thai) or passports (Non-Thai) 父母护照复印件
 A copy of student's birth certificate 出生证 A copy of student's passport (Non-Thai) 学生护照复印件
 A copy of house registration of applicant and both parents A copy of visa and work permit (Non-Thai) 签证及工作许可复印件
 A parent's business name card 名片及营业执照/在职证明
- Application Fee 申请费 4,000 Baht : _____ Test/Assessment Fee 测试费 3,000 Baht : _____

STUDENT'S PARTICULARS 学生信息 (Please complete application with **CAPITAL LETTERS** only.)

Applying for Grade 申请年级: _____ Year of Entry 入学年份: _____

Gender 性别: Male 男 Female 女

Name 姓名: _____
First Name 名 Family Name 姓 Nick Name 昵称

Thai Name 泰文名: _____
ชื่อ นามสกุล ชื่อเล่น

Chinese Name 中文名: _____ Religion 宗教信仰: _____

Date of Birth 生日: _____ Country of Birth 出生地: _____ Nationality 国籍: _____
DD/MM/YY

Passport No. 护照号: _____ Date of Issue 签发日期: _____

Date of Expiry 有效期至: _____ Type of Visa 签证类型: _____

Student's Mobile No. 学生手机号: _____ Student's E-Mail 学生邮箱: _____

STUDENT'S SIBLINGS / COUSINS IN CONCORDIAN 在校兄弟姐妹

	Name 姓名	Nickname 昵称	M/F 性别	Date of Birth 生日 (DD/MM/YY)	Grade/ Level 年级	Relationship 关系 (Sibling/Cousin)
1						
2						
3						
4						

STUDENT'S EDUCATIONAL HISTORY 学习经历

	Name & Country of Schools 学校名字及所在地	From 入学 (Month/Year)	To 毕业 (Month/Year)	Grade / Level 年级 (From/To)	Language of Instruction 教学语言
1					
2					
3					

LANGUAGE 语言能力

	First Language 第一语言	Second Language 第二语言	Third Language 第三语言	Language usually spoken at home / with student 日常用语
Child's Language 孩子 <i>(please fill this out for all children 1.5 years of age and older)</i>				
Father's Language 父亲				
Mother's Language 母亲				
Caregiver's language 看护 <i>(Nanny, grandparents, etc.)</i>				

English 英文

a) How long has he/she been learning English and at which school? 在哪里学了英语几年?

No. of years 年数 _____ School 学校 _____

b) Is he/she studying a tutorial English program, and, if so, at which school or at home? 家教或补习吗? Yes No

School / Home 补习班/家教 _____ Details 简述 _____

Chinese 中文

a) How long has he/she been learning Chinese and at which school? 在哪里学了中文几年?

No. of years _____ School _____

b) Is he/she studying a tutorial Chinese program, and, if so, at which school or at home? 家教或补习吗? Yes No

School / Home 补习班/家教 _____ Details 简述 _____

GENERAL INFORMATION 基本信息

Is your child taking any medication on a regular basis? 长期服用药物? Yes No N/A

Does your child have any physical health limitations? 健康问题? Yes No N/A

Does your child have any food allergy? 过敏? Yes No N/A

Does your child have any special musical talent or sport skills? 音乐或体育特长? Yes No N/A

Has your child ever been suspended, asked to leave, or dismissed from school? 曾被要求停课? 退学? Yes No N/A

Has your child been provided with academic learning support in the past? 曾接受学习帮助? Yes No N/A

Has your child ever been assessed by an Educational Psychologist due to learning concerns? 咨询学习? Yes No N/A

Has your child ever been assessed by an Educational Psychologist due to emotional or behavioural concerns? 咨询行为? Yes No N/A

If "yes" to any of the above, please describe and also enclose copies of the results: 若以上有 "Yes" 的, 请陈述具体情况, 并附加相关文件

FAMILY INFORMATION 家庭状况 (提供以下信息目的在于更好地保护孩子, 请务必准确填写)

Parents' marital status 婚姻状况: Married 已婚 Divorced 离异 Separated 分居 Remarried 再婚 Widowed 丧偶

If parents are separated, divorced or remarried, please provide the following information and official documentary.

父母离异或再婚请说明情况, 并提供相关文件。

Who has the legal custody? 监护人 Father 父 Mother 母 Guardian 监护人 _____ (注明关系)

Who student lives with? 与谁居住? Both Parents 父母 Father 父 Mother 母 Guardian 监护 _____

Father 父 **Step Father 继父** **Father Deceased 父故** **Guardian 监护** _____ (注明关系)

Name 姓名: MR. _____ Nationality 国籍: _____

ชื่อ-นามสกุล Name in Thai (if applicable): _____

Home Address 家庭住址: _____

Home Phone No. 电话: _____ Mobile Phone No. 手机: _____

Company Name 公司名称: _____ Position/Occupation 职位: _____

Company Address 公司地址: _____ Owner 雇主 Employee 雇员

Company Phone No. 公司电话: _____ Company or Home Fax No. 传真: _____

E-mail 邮箱: _____ Type of Business 经营范围: _____

Education 教育	Institution 学校	Country 国家	Program 科目
High School 高中	_____	_____	_____
Bachelor's Degree 学士	_____	_____	_____
Master's Degree 硕士	_____	_____	_____
Other 其他	_____	_____	_____

Mother 母 **Step Mother 继母** **Mother Deceased 母故** **Guardian 监护** _____ (注明关系)

Name 姓名: MR. _____ Nationality 国籍: _____

ชื่อ-นามสกุล Name in Thai (if applicable): _____

Home Address 家庭住址: _____

Home Phone No. 电话: _____ Mobile Phone No. 手机: _____

Company Name 公司名称: _____ Position/Occupation 职位: _____

Company Address 公司地址: _____ Owner 雇主 Employee 雇员

Company Phone No. 公司电话: _____ Company or Home Fax No. 传真: _____

E-mail 邮箱: _____ Type of Business 经营范围: _____

Education 教育	Institution 学校	Country 国家	Program 科目
High School 高中	_____	_____	_____
Bachelor's Degree 学士	_____	_____	_____
Master's Degree 硕士	_____	_____	_____
Other 其他	_____	_____	_____

PERSONAL MEDICAL HISTORY 药物史 (提供以下信息目的在于更好地保护孩子, 请务必准确填写)

- | | |
|---|---|
| <input type="checkbox"/> Pre-birth 早产 (_____ Month/几个月) | <input type="checkbox"/> Hepatitis B or C Disease 乙肝或丙肝 |
| <input type="checkbox"/> Asthma 哮喘 | <input type="checkbox"/> Measles 麻疹 |
| <input type="checkbox"/> Anxiety/Depression/mental illness 焦虑/抑郁/心理问题 | <input type="checkbox"/> Mumps 腮腺炎 |
| <input type="checkbox"/> Cardiac Condition/Heart Murmur 心脏病/心脏杂音 | <input type="checkbox"/> Rheumatic Fever 风湿热 |
| <input type="checkbox"/> Concussion 脑震荡 | <input type="checkbox"/> Seizures 癫痫 |
| <input type="checkbox"/> Dental Problems/Infections 口腔问题/感染 | <input type="checkbox"/> Skin Infections / Eczema 皮肤感染/湿疹 |
| <input type="checkbox"/> Diabetes 糖尿病 | <input type="checkbox"/> Sickle Cell Anemia 镰状细胞性贫血 |
| <input type="checkbox"/> Gastrointestinal Problems 胃肠道问题 | <input type="checkbox"/> Thyroid Disorder 甲状腺紊乱 |
| <input type="checkbox"/> Eye Problems, Poor vision 视力障碍, 弱视 | <input type="checkbox"/> Tuberculosis 结核 |
| <input type="checkbox"/> Ear Infection, Poor Hearing 耳腔感染, 听力不佳 | <input type="checkbox"/> Other please explain 其他, 请说明 |

Please give more details if applicable 详细情况

How parents came to know about Concordian International School? 如何得知学校

- Concordian Parents 在校家长 () please specify name 家长姓名 _____
- Commercial Advertisement 广告 () please specify media 媒体名称 _____
- Others 其他 () please specify 说明 _____

Why do you choose to apply to Concordian International School? 为何申请我校

Please give the list of schools you have already visited? 已拜访过的学校

Who supports the student's tuition fee? 学费支持者

- Father 父 Mother 母 Grandparent 祖父母 Company 公司 Other 其他 _____

Have you attended our Official School Tour? 是否参观过我校 Yes 是 No 否

If so, when did you visit? 若是, 何时曾拜访 _____

If you have not had the opportunity to visit Concordian, please allow us to take you on a tour of our modern facilities and give you a thorough explanation of our unique curriculum. To schedule a tour, please call Admissions Officer at (66 2) 706-9000 ext. 211-212.

PARENTAL AGREEMENT

Students may not enroll in Concordian International School unless one parent or legal guardian is living full-time in Thailand. I confirm that this child will be living with at least one parent or legal guardian while enrolled at Concordian International School. In signing this application, I give Concordian International School permission to obtain records from my child's previous school. I certify that the information given on this form is full and complete to the best of my knowledge. I understand that, if I fail to provide accurate details of important information about this child, Concordian International School reserves the right to restrict entry into or withdraw a place in this school. I also understand by submitting this application of admission and application fee does not guarantee acceptance of the student.

Signature of parent/guardian 家长签名: _____ Date 日期: _____
() DD/MM/YY