

ENROLLMENT FORM

Date:

Child
Last name: _____ First name: _____ Middle name: _____
(Family name) (given name)
Date of Birth (d/m/y): _____
Place of Birth: _____
Nationality: _____ Age: _____ Sex: _____
Religion: _____
Home Address: _____
Tel: _____

Family
Father's name: _____
Nationality: _____ Age: _____
Occupation: _____ Position: _____
Company Address: _____
Tel: _____ Mobile/Pager: _____
Mother's name: _____
Nationality: _____ Age: _____
Occupation: _____ Position: _____
Company Address: _____
Tel: _____ Mobile/Pager: _____
No. of Brothers: _____ Ages: _____
No. of Sisters: _____ Ages: _____

Other Information

Fears: _____
Favourite toys or possession: _____
Height (m): _____ Weight (kg): _____
Physical Disabilities/ Major Illnesses: _____
Treatment/ Medication/ Allergies: _____
Doctor (in HCM City): _____

Why did you enroll your child at FOSCO PIK?

Please give details of someone who can act on your behalf if there's an emergency and neither parents can be reached.

Name: _____ Relationship to parents: _____
Address: _____ Tel: _____

BOTH PARENTS TO SIGN

Father's Signature

Mother's Signature

STUDENT FORM

Name: _____

Age: _____

Date of Birth: _____

Class: _____ Class Teacher: _____

Enrolled Date: _____ Re-enrolled Date : _____

Appointment with Director of Studies. Date & Time: _____

(All students 4 yrs and up must meet with the DOS prior to enrollment. Please coordinate this appointment with the school Secretary.)

Type of student:

Halfday : _____/Week Fullday : _____days/Week

Short term student (summer program only)

Lunch : Any allergies? _____

Bus : * One way : * Two ways :

Starting date : _____

Note :

Student will terminate. Date : _____

Limited English : Yes No * ESL : Yes No

Previous School (if any) _____

Previous student records
(please attach copies) _____

* To receive all correspondence in English and Vietnamese as well

Father's Signature

Mother's Signature