**APPLICATION FORM**

Please complete this form to apply for a place for your child at our school. The form does not commit us to offering you a place or you to accepting one. When you have completed the form, please return it, along with a copy of your child’s last school report, and the Application fee to:

Email: admissions@yuai-is.com, *or*

Fax: +81 6804 7364.

Please complete **all** parts of this form:

|  |  |
| --- | --- |
| Preferred start date: | Nationality: |
| How did you hear about Compass International School Doha: | |
| Preferred Campus: Gharaffa / Madinat Khalifa / Rayyan (please delete as necessary, or leave if no preference) | |

**Personal information:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Child’s full name: | | | | | | | |
| Home Address:  (Current) | | | | | | | |
|  | | | | | | | |
| Tel. No (Home): | Fax No (Home/Business): | | | Parent’s Personal Email Address: | | | |
| Date of Birth:  (dd/mm/yyyy) | | Age: | | | Male | | Female |
| Medical Conditions? If yes, please elaborate: | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| Home Language:  Other languages: | | | | | | | |
| Level of English: Excellent | | | Average | | | Weak | |
| Any additional personal information you think is relevant: | | | | | | | |

**Education:**

|  |  |
| --- | --- |
| Present School: | |
| Address: | |
|  | |
| Telephone & Fax No: | Email Address: |
| Date Started: | Date Left: |

|  |  |
| --- | --- |
| Previous School: | |
| Address: | |
| Telephone & Fax No: | Email Address: |
| Date Started: | Date Left: |
| Is your child currently in his/her age appropriate class? If not, please explain: | |
| Does your child have any special needs and/or learning difficulties? Please see attached declaration. | |

**Family Information:**

|  |  |  |  |
| --- | --- | --- | --- |
| Father’s full name: | | | |
| Father’s Employer (Company): | | | Job Title: |
| Work Tel. No: | Father’s Mobile No.: | Work email address: | |
| Mother’s full name: | | | |
| Mother’s Employer: | | | Job Title: |
| Mother’s work No: | Mother’s Mobile No.: | Work email address: | |
| If one parent is not in Japan, please supply name and contact details (e.g.. if parent’s are separated/divorced): | | | |
| Who will be responsible for school fees (for example you or your employer)? | | | |

**I attach the Application Fee of xxx JPY and understand that this is non-refundable.**

**I understand that, should I accept any offer of a place for my child at Yuai International School , I will be required to pay a refundable deposit of xxx JPY and will be asked to sign an agreement with the school to hold the place available. In addition, I understand that once the School and Parent Agreement is signed, I am responsible for payment of tuition fees for the first school year and for a non-refundable Development Levy.**

I confirm that all of the information I have disclosed in this Application Form is, to the best of my knowledge, true and accurate. I confirm that I have legal custody of the child for whom I am registering interest or that I have the legal custodian’s consent. I have attached a copy of my child’s latest school report (2 years for secondary plus Applicant Statement).

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name in full: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FEE STRUCTURE 2013/14**

|  |  |  |
| --- | --- | --- |
| **Starting** | **Primary School**  **Fees Due (JPY)** | **Secondary School**  **Fees Due (JPY)** |
| **Beginning of the Academic Year** | **xxx JPY** | **xxx JPY** |
| **From 1st November 2013** | xxx JPY | xxx JPY |
| **Beginning of the 2nd Term** | xxx JPY | xxx JPY |
| **From 2nd Half Term** | xxx JPY | xxx JPY |
| **Beginning of 3rd Term** | xxx JPY | xxx JPY |
| **From 3rd Half Term** | xxx JPY | xxx JPY |

*Primary School Fees are applicable to students in Early Years classes and Year 1 to Year 6.*

*Secondary School Fees are applicable to students in Year 7 to Year 11.*

*On application, we require:*

* A completed Application Form and application fee of xxx JPY (compulsory for application)
* Copy of student’s and parent’s passport (compulsory for application)
* Copy of student’s and parent’s Japan Residence Permit
* Birth certificate (compulsory for application)
* Vaccination card
* For Early Years and Primary – current academic year school report (compulsory for application)
* For Secondary – 2 years reports and personal statement (compulsory for application)
* 2 passport photographs
* The Application Fee is not applicable to parents applying for places through their company’s Guaranteed Places Agreement

*On enrolment of a new pupil, the following will be required:*

* A refundable Deposit of xxx JPY;
* A non-refundable Development Levy of xxx JPY;
* School Fees, dependent on joining date, as per above chart which is subject to confirmation by the Supreme Education Council.

*Fees are due on receipt of Invoice.*

All payments to be made to ‘EDUCATION OVERSEAS Japan LLC’

**Full Disclosure and Declaration of Needs**

In order to ensure that we are able to provide the optimum learning environment for all of our students, please sign each box relative to the following statements:

|  |  |
| --- | --- |
|  | Signature |
| 1. My child does not have any learning, behavioural or physical needs that will require specialist or additional support |  |
| 1. My child has never been identified as requiring additional learning support |  |
| 1. My child does not/has never had an Individual Educational or Behavioural or Learning Plan (or Handelingsplan in Dutch) |  |
| 1. My child does not/has never had a Statement of Educational Needs |  |

If you are unable to sign one or all of the boxes above because you know that your child has a learning need or requires support, please provide us with the following:

1. A copy of any school, medical or psychological report (translated into English) detailing the learning or behavioural need(s) and the level and type of support that is currently provided.
2. Any medication that is taken in relation to any learning or behavioural difficulties.
3. Details of all support previously provided (both in school and outside of school).
4. A copy (translated into English) of the most recent Individual Educational or Learning Plan (or Handelingsplan).
5. Any Statement of Educational Need.

Please note that failure to fully disclose any of the above may result in the offer of a place being withdrawn, or if already enrolled, your child’s place being retracted.

**الكشف الكامل وإعلان الاحتياجات**

من أجل التأكد من أننا قادرون على توفير البيئة التعليمية الأمثل لجميع طلابنا، يرجى تسجيل البيانات التالية:

|  |  |
| --- | --- |
| التوقيع |  |
|  | 1. ليس لدي إبني/إبنتي أي احتياجات تعليم إضافي أوسلوكي أو جسدي مما سوف يتطلب متخصص أو دعم إضافي. |
|  | 2. لم يتم أبداً تحديد إبني/إبنتي على إحتياجه إلي دعم تعليمي إضافي. |
|  | 3. لم يكن لإبني/إبنتي أي خطة تعلم أو تعليمية أو سلوكية باللغة الهولندية)Handelingsplanأو ( |
|  | لم يكن لإبني/إبنتي أي تقرير بإحتياجات تعلم إضافية. |

إذا كنت غير قادر على توقيع واحد أو كل من الخانات السابقة لأنك تعرف أن إبنك/إبنتك لديه حاجة أو يحتاج إلى دعم إضافي، يرجى تزويدنا بما يلي:

1. نسخة من أي تقرير طبي أو نفسي من أي مدرسة (مترجمة إلى الإنجليزية) بالتفصيل لكل إحتياجات التعلم أو الحالة السلوكية ومستوى ونوع الدعم الذي يتم توفيره حاليا.
2. ذكر أي دواء يتم أخذه له علاقة بصعوبات التعلم أو الصعوبات السلوكية.
3. تفاصيل لكل الدعم المتوفر سابقاً (داخل و خارج المدرسة).
4. نسخة (مترجمة إلى اللغة الإنجليزية) من أحدث خطط التعلم أو التعليم أو(Handelingsplan)
5. أي تقرير للإحتياجات الخاصة.

يرجى ملاحظة أن الفشل في الكشف الكامل عن أي من أعلاه قد ينتج عنه سحب عرض المدرسة بتوفير مقعد للطالب ، أو إذا كان قد التحق بالفعل سوف يتم شطبه من المدرسة.