



# TIME INTERNATIONAL SCHOOL

Application Received:  
Date to Begin:  
Admitted to Grade:

## Student Admissions Application Form

Instructions for application: To begin the admission process, please submit this form, copies of official school records for the last three years, the Health Form, Electronic, 3 photographs, photocopy of student passport, and the application fee.

### ❖ 1 Student Information

Student's Name: \_\_\_\_\_  
*Family Name* *First Name* *Middle Name*

Preferred name for student directory: \_\_\_\_\_

Expected date of enrollment: \_\_\_\_\_ Gender (M/F) : \_\_\_\_\_ Date of birth: \_\_\_\_\_  
*Month Day Year*

Place of Birth: \_\_\_\_\_ Country of citizenship: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Language Spoken at home: \_\_\_\_\_

Country Issuing Passport: \_\_\_\_\_ Other Languages spoken : \_\_\_\_\_

Home address in Malaysia: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### ❖ 2 Family Information

*Father*

*Mother*

Parent's Name: \_\_\_\_\_  
*Family Name First Name Middle Name*

\_\_\_\_\_ *Family Name First Name Middle Name*

Place of birth: \_\_\_\_\_

\_\_\_\_\_

Country of citizenship: \_\_\_\_\_

\_\_\_\_\_

Parent, Step-parent or Guardian: \_\_\_\_\_

\_\_\_\_\_

In residence with the student? \_\_\_\_\_

\_\_\_\_\_

Address if different from student: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone # 1: \_\_\_\_\_ Telephone #2: \_\_\_\_\_

\_\_\_\_\_

Fax Number: \_\_\_\_\_ H/P: \_\_\_\_\_

E-mail: \_\_\_\_\_

Name of other siblings applying to/currently in Horizon: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

❖ **3 Mailing and Billing Information**

Mailing address for school correspondence: *Father*

*Mother*

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Billing address (please indicate one option)

Home address  Office address

Home address  Office address

Other address: \_\_\_\_\_

Other address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

❖ **4 Company Information** *Father*

*Mother*

Parent/guardian name: \_\_\_\_\_

\_\_\_\_\_

Position: \_\_\_\_\_

\_\_\_\_\_

Company name: \_\_\_\_\_

\_\_\_\_\_

Company address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone #1 : \_\_\_\_\_ #2 \_\_\_\_\_

\_\_\_\_\_

Direct Line: \_\_\_\_\_ Fax: \_\_\_\_\_

\_\_\_\_\_

Does the company above pay full tuition fees? Yes  No

What percentage of fees does company pay? \_\_\_\_\_

❖ **5 Emergency Information**

*Person to be contacted in an emergency if parents are not available. Please use a person outside your household.*

Contact number 1:

Contact number 2:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone and H/P: \_\_\_\_\_

Telephone and H/P: \_\_\_\_\_

Language preferred / spoken: \_\_\_\_\_

Language preferred / spoken: \_\_\_\_\_

## ❖ 6 Student's Educational Information

Name of School City / Country (Please begin with the most recent year)	Type Of Curriculum (American/British, etc.)	Attended From/To (mo/yr)	Age	Grade/ Standard/ Form/Year	Language of Instruction

## ❖ 7 Student's Detailed Information

- Has the student previously submitted an application or attended Time International School? No  Yes
- Has the student received any special academic, social, emotional support (i.e. speech, learning disability, counseling, etc.) and / or psycho-educational testing? No  Yes
- 2a. If yes, what type of support has the student received? \_\_\_\_\_  
(Please attach relevant reports and test results.)
- Has the student ever repeated a grade/level? No  Yes  Which?
- Has the student ever skipped a grade (double promotion)? No  Yes  Which?
- Has the student ever asked to leave the school? No  Yes  Which?
- Does the student adjust to new situations easily? No  Yes  Which?
- Has the student ever been in an English-as-a-second-Language program? No  Yes  Which?
- Does the student read for pleasure? \_\_\_\_\_ Complete Homework? \_\_\_\_\_ Show independence? \_\_\_\_\_
- Other comments to assist the teacher?

## ❖ 8 Parental Agreement

*In registering my child at the Time International School, I agree to conform to the rules and procedures of the school as established by the Board of Directors and the Administration.*

*Full and accurate information about your child/children is important for the admission staff to properly assess Horizon School's ability to provide an appropriate educational program. The withholding of records, especially those indicating that a student has special needs or educational handicaps may delay the admission process and the placement of your son or daughter into the school and ultimately could result in either the denial of admission or in the case of a child already enrolled, the reversal of the decision.*

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

Parent / Guardian

Date: \_\_\_\_\_

**Any additional information you would like to share with the school about your child?**

**Office Use Only:**

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