

York International Kindergarten York International Pre-School York International Child Care Centre

Application Form

CLASS APPLIED (please ✓ which applicable box)

For School Use Only

Application No.

☐ PN	1 st Choice	A.M. Session		nterview No.	
□ N1		P.M. Session		Submission Date	9
☐ L2	2 nd Choice	A.M. Session		Date of Interview	ı Time
□ U3*	2 0110100	P.M. Session		Date of Admission	on
U3: PM Session Onl	У		_		
	etails of Ap	plicant			1 ^{1/} 2" x 2 "
Applicant's na	ame :				PHOTO
Family Name	:				111010
Given Name	:				
Chinese name	e:		Male	Female	e
Place of birth:			Date of birth	:/	/ Month Year
Nationality:		Birth Ce	ertificate/Pas	ssport No.:	
First language	e:	Other la	anguage(s) s	poken :	

Father's Information

Title: *Mr. / Dr. / Prof. Marital	status: *Single / Married
Family Name:	Given Name:
Chinese Name:	Nationality:
First Language:	Second Language:
Academic Qualification: Postgraduate Study	
Profession/occupation:	
Company Name:	
Work Address:	
Phone:	Mobile:
Fax:	E-mail:
Is the applicant's father previously a York student?	☐ Yes ☐ No
Mother's Information Title: *Ms. / Miss / Mrs. / Marital Dr. / Prof.	status: *Single / Married
Family Name:	Given Name:
Chinese Name:	Nationality:
First Language:	Second Language:
Academic Qualification: Postgraduate Study	☐ University Graduate ☐ Secondary School
Profession/Occupation:	
Phone:	Mobile:
Fax:	E-mail:
Is the applicant's mother previously a York studen	t? □ Yes □ No
If yes, please state the latest year of attendance at	York:

Details of Other Siblings

Name	Age	Sex		Pres	ent sc	hool attend	ding
Does the applicant have any siblings	who hav	e studied	at York	before?	P	☐ Yes	□No
Name of sibling who is / was a York studen	t	Latest	class	and ye	ear at \	/ork	
	CI	ass: *PN	/ N1	/ L2	/ U3	Year:	
	CI	ass: *PN	/ N1	/ L2	/ U3	Year:	
	CI	ass: *PN	/ N1	/ L2	/ U3	Year:	
	1						
Father Mother Guardian Family Contact Details	Step-		Ste	p-moth	er [Brother(s)) / Sister(s)
Hong Kong residential address (In C	apital Let	tters):					
Flat/Room Floor Block Na	ame of Bu	uilding/Esta □	ate Kowloor			I Name of Si Ferritories	treet (or Village)
Hong Kong residential address (In C	Chinese :)						
Flat/Room Floor Block N	ame of Bu	ıilding/Esta	ate	 Nun	nber and	d Name of S	treet (or Village)
District	ong Kong		Kowloor	n 🗆	New 7	Territories	
Phone:		Fax :					
E-mail:							

Please state the email address you wish to use to receive information from.

Education Details List current or previous kindergarten / pre-kindergarten attended (if any) Does the applicant have any health or physical concerns? Yes No If yes, please specify Does the applicant have any special needs? If yes, please specify Does the applicant have any special skills, interests or talents? Please specify ______ Other information or comments that you think we should know about this applicant. Documents to be submitted with this Application Form One photograph attached to this application form. Photocopy of Birth Certificate.

Four self-addressed A5 envelopes(14.8cm x 21cm), stamped at \$5.4 dollars each.

Photocopy of Immunization Record (if applicable).

Most recent school report (if applicable).

Medical / special needs reports (if applicable).

Child Care Centre Applicants Only

SESSION PREFERENCE							
Session	Tentative Session Times	Duration	First Choice	Second Choice			
	8:30am - 10:30am	2 hours					
Monday, Wednesday & Friday &	10:45am - 12:45pm	2 hours					
2. Tuesday & Thursday	1:00pm - 3:00pm	2 hours					
	3:15pm - 5:15pm	2 hours					
☐ Please ✓ where applicable							
ather's signature	Mother's signature						

Please send this Application Form, supporting documents and non-refundable application fee (made payable to Genlink International Ltd.). For those who applied for the Pre-Nursery (PN) classes, please mail your cheque to 10 York Road, Kowloon Tong, Kowloon. Should you applied for the kindergarten classes (N1, L2 or U3), please mail your cheque to 51 Cumberland Road, Kowloon Tong, Kowloon.

After receiving the completed application form, the school will send a sms to the parent. Parents must remember to keep this message as proof for future reference.

Declarartion from Parent:

I declare that the data given in this form is accurate and complete, and consent that the data can be used in accordance with the School's Policy on Personal Data. If my application is successful, I shall obey the regulations of the School. The applicant can refer to the School's Policy on Personal Data which is available at the general office of the school.



Kindergarten Campus:

51, Cumberland Road, Kowloon Tong, HK Tel: (852) 2336-1483 Fax: (852) 2336-1825

York International Pre-School:

G/F (Portion) & 1/F, No. 14 Stafford Road, Kowloon Tong, Kowloon Tel: (852) 2339-0728 Fax: (852) 2337-8083

Child Care Centre Campus:

10, York Road, Kowloon Tong, HK Tel: (852) 2336-1119 Fax: (852) 2337-5924 www.york.edu.hk