



## YORK MONTESSORI INTERNATIONAL PRE-SCHOOL (MEI FOO) YORK MONTESSORI INTERNATIONAL PLAYSCHOOL (MEI FOO)

### APPLICATION FORM

CLASS APPLIED ( please ✓ which applicable box )		
<input type="checkbox"/> PN	1 <sup>st</sup> Choice	A.M. Session <input type="checkbox"/>
<input type="checkbox"/> N1		P.M. Session <input type="checkbox"/>
<input type="checkbox"/> L2	2 <sup>nd</sup> Choice	A.M. Session <input type="checkbox"/>
<input type="checkbox"/> U3*		P.M. Session <input type="checkbox"/>

\*U3\*: PM Session Only

For School Use Only	
Application No.	
Interview No.	
Submission Date	
Date of Interview	Time
Date of Admission	

### Personal Details of Applicant

Applicant's Name: \_\_\_\_\_

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

Given Name: \_\_\_\_\_  Male  Female

Chinese Name: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Place Of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Birth Certificate/Passport No.: \_\_\_\_\_

First Language: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_



## ***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  University Graduate  Secondary School

Profession/occupation: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

Is the applicant's father previously a York student?  Yes  No

If yes, please state the latest year of attendance at York: \_\_\_\_\_

## ***Mother's Information***

Title: \*Ms. / Miss / Mrs. / Dr. / Prof. Marital status: \*Single / Married

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

Chinese Name: \_\_\_\_\_ Nationality: \_\_\_\_\_

First Language: \_\_\_\_\_ Second Language: \_\_\_\_\_

Academic Qualification:  Postgraduate Study  University Graduate  Secondary School

Profession/Occupation: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

Is the applicant's mother previously a York student?  Yes  No

If yes, please state the latest year of attendance at York: \_\_\_\_\_

## Details of Other Siblings

Name	Age	Sex	Present school attending

Does the applicant have any siblings who have studied at York before?  Yes  No

Name of sibling who is / was a York student	Latest class and year at York
	Class: *PN / N1 / L2 / U3 Year: _____
	Class: *PN / N1 / L2 / U3 Year: _____
	Class: *PN / N1 / L2 / U3 Year: _____

## Family Details

Applicant lives with

Father  Mother  Step-father  Step-mother  Brother(s) / Sister(s)

Guardian \_\_\_\_\_ (name)

## Family Contact Details

Hong Kong residential address (In Capital Letters):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Flat/Room	Floor	Block	Name of Building/Estate	Number and Name of Street (or Village)	
<input type="text"/>			<input type="checkbox"/> Hong Kong	<input type="checkbox"/> Kowloon	<input type="checkbox"/> New Territories
District					

Hong Kong residential address ( In Chinese :)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Flat/Room	Floor	Block	Name of Building/Estate	Number and Name of Street (or Village)	
<input type="text"/>			<input type="checkbox"/> Hong Kong	<input type="checkbox"/> Kowloon	<input type="checkbox"/> New Territories
District					

Phone : \_\_\_\_\_ Fax : \_\_\_\_\_

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

Please state the E-mail address you wish to use to receive information from.

## Education Details

List current or previous kindergarten/pre-kindergarten attended (if any)

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Does the applicant have any health or physical concerns?  Yes  No

If yes, please specify \_\_\_\_\_

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Does the applicant have any special needs?

If yes, please specify \_\_\_\_\_

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Does the applicant have any special skills, interests or talents? Please specify \_\_\_\_\_

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Other information or comments that you think we should know about this applicant. \_\_\_\_\_

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## Documents to be submitted with this Application Form

- One photograph attached to this application form.
- Photocopy of Birth Certificate.
- Photocopy of Immunization Record (if applicable).
- Most recent school report (if applicable).
- Medical/Special needs reports (if applicable).
- Four self-addressed A5 envelopes (14.8cm x 21cm), stamped at \$5.4 dollars each.

Father's signature \_\_\_\_\_

Mother's signature \_\_\_\_\_

Please send this Application Form, supporting document and non-refundable application fee (made payable to **Genlink International Ltd.**) to the respective campus below.

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

Declaration 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.



**YORK MONTESSORI INTERNATIONAL PRE-SCHOOL (MEI FOO)**  
**YORK MONTESSORI INTERNATIONAL PLAYSCHOOL (MEI FOO)**

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