



YORK INTERNATIONAL PRE-SCHOOL (WETLAND)

APPLICATION FORM

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

1 1/2" x 2"
PHOTO

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)

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.
- 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 documents 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 INTERNATIONAL PRE-SCHOOL (WETLAND)

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Website: <http://www.york.edu.hk/>