Application Form

Primary School 9 Pridi Banomyong 20/1, Sukhumvit 71, Watthana, Bangkok 10110 Thailand +662 381 2387

High School 1020 Sukhumvit Road, Phra Khanong, Khlong Toei, Bangkok 10110 Thailand +662 056 9555

admissions@standrews.ac.th www.standrews.ac.th

For official use only

EU

EAL

EL

cion No.: Family No.:

on Date: School Code:

STUDENT INF First Name:	ORMATI	ION	Male	Female Surname:	Nickname:					
Date of Birth (DD,	/MM/YY):	Nationa	lity:		Mobile Nur	mber (if applicabl	e):			
Email (if applicab	ole):		Propo	sed Start [)ate:	Propo	sed Year Group:		RECENT PHOTO	
Passport Number	r/Identific	ation Nur	nber:	Place	e of Issue:					
Date of Issue:			ate of Exp	oiry:		Type of Visa:				
PARENT/GUAI Title:	RDIAN II First Nar		ATION 1			Surnam	e:			
Nationality:		Relations	ship to Stu	udent:	Mobile	phone number:	Home phone num	nber:	Work phone number:	
Email (home):						Email (work):			
Home address:										
Company name:						Position:				

PARENT/GUARDIAN INFORMATION 2

Does your company support school fees?

Title: First Name: Surname:

Nationality: Relationship to Student: Mobile phone number: Home phone number: Work phone number:

Email (home): Email (work):

Yes

No

Home address:

Company address:

Company name: Position:

Company address:

Does your company support school fees? Yes No

Address for sending invoice: Home Office Other (please indicate below)

PREVIOUS SCHOOLS (starting from most recent school attended) Name of school: Final Year/Grade: Country: From: To: Reason for leaving: Name of school: Final Year/Grade: Country: From: To: Reason for leaving: Name of school: Country: From: To: Final Year/Grade: Reason for leaving: Name of school: Country: From: To: Final Year/Grade: Reason for leaving: **SIBLINGS** Sibling 1 School currently enrolled: Name: Age: Sibling 2 Name: School currently enrolled: Age: Sibling 3

ENGLISH PROFICIENCY & LANGUAGE ASSESSMENT

Please assess your child's, as well as your own, English language ability in the table below:

Age:

1 = Very Poor 2 = Poor 3 = Satisfactory 4 = Good 5 = Very Good

	Listening	Speaking	Reading	Writing
Child				
Mother/Guardian				
Father/Guardian				

School currently enrolled:

First (strongest) language	First ((strongest))	lan	gu	ag	e
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Name:

Foreign language(s) previously studied:

List any other language(s) understood:

MEDICAL INFORMATION

Family Doctor's Name:

Contact Number:		Fax:	Email:	
HEALTH INSURANCE INFORMATION	N			
Does your child have health insurance?		lo		
Company:		Represent	ative's Name:	
Policy Number:			Country:	
PAST MEDICAL HISTORY				
Please indicate whether your son/daughter	has a history	of any of the foll	owing and provide details as approp	oriate:
Asthma, wheezing or other lung conditions	Yes	No Details:		
Back pain or spinal condition	Yes	No Details:		
Bleeding disorder / Blood disease	Yes	No Details:		
Bone and joint disease or injury	Yes	No Details:		
Convulsions / Epilepsy / Seizures	Yes	No Details:		
Head injury / Concussion	Yes	No Details:		
Food / Drug allergies	Yes	No Details:		
Heart condition	Yes	No Details:		
Digestive problems	Yes	No Details:		
Special diet	Yes	No Details:		
Ear / hearing impairment	Yes	No Details:		
Date last tes	ted:			
Vision impairment Date last tes	Yes	No Details:		
Other (please describe):	iteu.			
Has your child had a recent/up-to-date inje	ction for:			
DPT/Dtap	Yes	Date:		No
Hepatitis A	Yes	Date:		No
Hepatitis B	Yes	Date:		No
Japanese Encephalitis*		Date:		No
*Japanese Encephalitis is another injection	you may wish	n your child to ha	ave, particularly for visits to the Nortl	n of Thailand.

Hospital:

PERSONAL INFORMATION COLLECTION STATEMENT

The personal data collected from applicants and/or their parents/guardians pursuant to this application form will be handled by our staff, kept confidential and used by St Andrews International School Bangkok ("we" or "us") for lawful and relevant purposes including but not limited to:

- (a) assessing the suitability of applicants' admission to St Andrews International School Bangkok (the "School");
- (b) processing applications for admission;
- (c) verification of the applicant's examination results, academic records and other information;
- (d) school administration and operation after admission;
- (e) sending communications to parents and students including but not limited to newsletters and information about events and extra-curricular activities provided by the School or third party providers;
- (f) statistical and research purposes;
- (g) other school related purposes; and
- (h) alumni activities

If any of our communications constitute direct marketing we will separately seek your consent where required by law. We may disclose some of the data to third parties such as agencies (including the Thai government), service providers and contractors (whether within or outside Thailand) appointed by us to undertake some of our academic, pastoral and administrative functions. This includes transferring data between affiliates. We will not disclose any personal data to any external bodies or organisations unless:

- (a) Such disclosure is expressly provided for under this Statement;
- (b) Permitted to do so by the applicant or his/her parent/guardian; and/or
- (c) Permitted or required by law.

Personal data may be stored in NAE database systems (which may be located within or outside Thailand) and online portals and where the application is successful, such personal data will form part of the applicant's official student records. It may also be stored in online student resources such as the global classroom.

Where such personal data is not required to be retained by law, such personal data will be destroyed with 24 months (or earlier, if required or permitted by law) following rejection of the

If a Parent Teacher Group (PTG) is established, we may provide such personal data for inclusion in the PTG directory and other PTG activities. If an applicant or his/her parents/guardians do not wish for such data to be included in the PTG directory, please inform us. We may place a student's photo, name or school work in our website or publications. In the event that a student already has a sibling at the School, the records of such sibling will be updated according to the data provided on the new student's enrolment form where relevant. Failure to provide the requested data may result in us being unable to process the application and may influence the outcome of the application.

All practicable steps will be taken to ensure that personal data held by us is accurate. We will take all practicable and reasonable steps to ensure security of the personal data and to avoid unauthorised or accidental access, collection, use, disclosure, copying, modification, disposal, erasure or other use. Applicants or their parents/guardians have the right to access or correct personal data held by the School. Requests for access and correction should be addressed in writing to the Head of School and addressed to the School. We may levy a charge for accessing the information.

The terms of NAE's privacy policy can be found at www.nordanglia.com.

I consent to the collection, use, disclosure, processing and transfer of my personal data, including health data, as set out in the Personal Information Collection Statement.

Signature	Date	
	- Date .	

CHILD SAFEGUARDING POLICY

By enrolling your child at St Andrews you agree to work in partnership with the school and abide by our Child Safeguarding Policy. All St Andrews International School Bangkok students should be treated with respect and dignity.

Signature	Date
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INDEMNITY TO ST ANDREWS INTERNATIONAL SCHOOL **BANGKOK**

I agree to my child being included in swimming lessons, educational outings and other educational activities arranged by the School while he/she is attending St Andrews International School Bangkok. I give permission for my child to be photographed/filmed for use in school publications, including but not limited to, publication via website or other technological publications, newsletters, newspapers, or magazines. In the event of an injury to my child or damage to the property of my child whilst participating in the above, or while on the school premises or being transported to or from the school, I will not hold the School or any member of the school staff responsible. In the event my child travels to or from school on one of the buses organised by the School Transport Department, I agree that in the event of any injury to my child I will not hold the School Transport Department or any of its members liable. Therefore, in signing this indemnity, I understand that in the event of an emergency, every effort will be made to contact parents. If this is not possible, my child will be taken to either his/her family doctor, or to a suitable hospital for treatment.

Signature		(Father)
Signature		(Mother)
Signature		(Guardian)
	Date	

DECLARATION

I hereby confirm that I wish for my son/daughter to be assessed for a place at St Andrews International School Bangkok. I understand that this application does not guarantee my son/daughter a place at the school. I enclose with my application (please tick):

ALL APPLICANTS

Photocopy of your child's birth certificate or passport

Photocopy of parents'/guardians' passports

Photocopy of your child's vaccination book

2 photographs of each parent/guardian (1 inch by 1 inch)

2 photographs of your child (2 inches by 2 inches)

Photocopy of your child's reports from (officially translated into English) Where applicable, a copy of any education or medical reports	, ,	ADDITIONAL DOCUMENTS FOR THAI APPLICANTS ONLY Photocopy of parents'/guardians' Thai identification of Photocopy of parents'/guardians' house registration			
signed (Parent/Guardian 1)	 Name	Date			
signed (Parent/Guardian 2)	Name	Date	Page 4 (



Health Declaration

First Name:		Nick	kname:	Surna	ame:		
	Male	Female	Year Group	(at start date):	Date of Birth (DD/MM/YY):		
Please identify any medica	ntion that yo	our son/daugl	hter must take v	vhile at school.	Please be specific about timing	s and dosage:	
Are there any emotional re If yes, please explain:	strictions o	r limitations t	o your son/dau	ghter's physical	activities?	Yes	No
Are there any other medica school should be aware of			epression, anxie	ety or psycholog	ical symptoms) that the	Yes	No
Are there any specific relig If yes, please describe:	ious beliefs	that impact u	upon the admin	istration of med	lical care?	Yes	No
Has your child ever require occupational therapist?	ed the servi	ces of an educ	cational psycho	logist, mental h	ealth services or	Yes	No
Has your child ever had la	nguage/spe	ech problems	s which required	d therapy?		Yes	No
Has your child ever had ar	Individual	Education Pla	an (IEP) or state	ment?		Yes	No
Does your child have any s	ensory imp	airments or p	hysical disabilit	ties?		Yes	No
Has your child ever been c Attention Deficit Disorder (yperactive Disorder (ADHD), ease explain:	Yes	No



Application Process Checklist

Applicant's Surname:	Applicant's First	Name:	Applicant's Nickname:					
Parent/Guai	rdian Contact Number(s):	Parent/Guardian Email Ac	ldress:					
In support of my child's applicat	tion I have attached the follow	ving documents:						
	Photocopy of parents'/gua	ardians' passports and visas						
	Photocopy of child's (applicant) passport and visa							
	Photocopy of child's (applicant) birth certificate							
	Photocopy of child's (appli	icant) previous school report	ts					
	Photocopy of child's media	cal reports and vaccination b	oook					
2 photographs of each parent/guardian (1 inch by 1 inch)								
2 photographs of your child (2 inches by 2 inches)								
	6,000 baht application fee *Incurred only upon accep	(non-refundable) tance of offer letter from the	e school.					
Additional for Thai Applicants:								
	Photocopy of parents'/guar	dians' Thai identification ca	rds					
	Photocopy of parents'/guar	dians' and child's house reg	istration					
Date _		Parent's Signature						
	6.1.10	,						
	School Office	-	Vo ~ *					
	Sibiings: N Bus Servic	lame re	Year					
		nch						