

HIGH SCHOOL ENROLLMENT

PERSONAL DETAILS

* First Name: Cheryl	* Middle Name(s): Jie	* Surname Name(s): Zhou
* Gender:	<input type="radio"/> Male <input checked="" type="radio"/> Female	
Preferred Name:	* Date of Birth: Jun-1-2002	
* Nationality: USA	* First Language: English	
Passport Number:	Passport Expiry Date:	
* Home Address: No.51 Runan St., Shangh	* Home Tel: 021-xxxx xxxx	
* Current Year Group: G9	* Requested Year and Date of Enrollment: Sep.1, 2018	

PREVIOUS SCHOOL(S) ATTENDED

* Age	* Name of School	* Country/ Location	* Dates Attended (Month/Year)		* Year/ Grade/ Level	* Type of Curriculum
			From	To		
			16	American Schc		

PLEASE LIST THE INFORMATION ABOUT YOUR CHILD'S OTHER SIBLING(S)

Name	Date of Birth	Gender	Age	School	Intend to Apply for SCBS		Date Attended / Year Group
					<input type="radio"/>	<input type="radio"/>	
					Yes	No	
					<input type="radio"/>	<input type="radio"/>	
					Yes	No	
					<input type="radio"/>	<input type="radio"/>	
					Yes	No	

PARENTS INFORMATION

Parents' Status *(please leave this blank if any of the below are not applicable)*

- PARENTS DIVORCED
 PARENTS SEPARATED
 FATHER DECEASED
 MOTHER DECEASED
 FATHER REMARRIED
 MOTHER REMARRIED

FATHER

* Name: King Zhou		* Nationality: Chinese
Home Tel:		* Email: kingz@xxx.com
* Company Name: xx Rep Office		
Type of Business:		Position:
Work Tel:	* Mobile: 139xxxxxxx	Email:

MOTHER

* Name: Maria Lee		* Nationality: USA
Home Tel:		* Email: mlee@xxx.com
* Company Name: xx Bank		
Type of Business:		Position:
Work Tel:	* Mobile: 139xxxxxxx	Email:

GUARDIAN INFORMATION (FOR ALL OVERSEAS APPLICATIONS)

* Name: Guan Zhou		Title:
Home Tel:		Nationality:
Home address (if different):		Email:
Place of Work (Name & location):		
Type of Business:		Position:
Work Tel:	Mobile:	Email:

INTEREST AND HOBBIES

<p>* Please list your child's skills/interests/talents/school awards received. (E.g. sport/music/membership of clubs/school teams etc.)</p> <p style="margin-left: 20px;">basketball, ballet, music</p>		
<p>* Please indicate your child's: Favourite subject(s)</p> <p style="margin-left: 20px;">Math</p>	<p>* Most successful subject(s):</p> <p style="margin-left: 20px;">Math</p>	<p>* Weakest subject(s):</p> <p style="margin-left: 20px;">history</p>

FAMILY'S LANGUAGE PROFILE

<p>* Child's First Language: English</p>		<p>* Other Languages spoken: Mandarin</p>	
<p>* Languages spoken at home: Parents to child: English/Mandarin</p>			
<p>* Languages spoken at home: between siblings: English</p>			
<p>* If the child is not a native English speaker, please broadly assess his/her English proficiency below:</p> <p style="margin-left: 20px;">NA</p>			
Skill Areas	Assessment of Proficiency		
	Advanced	Intermediate	Beginner
* Speaking	NA	NA	NA
* Listening	NA	NA	NA
* Reading	NA	NA	NA
* Writing	NA	NA	NA
<p>* How long has your child been learning English? NA</p>			
<p>* What other languages has your child learnt at school? Spanish</p>			

ACADEMIC AND INTERESTS

- * Has your child ever been placed in a class above or below his/her chronological age? If yes, please give details. Yes No
- * Has your child ever been seen by an Educational Psychologist/Occupational Therapist/Psychiatrist/ Counsellor/Speech Therapist/other Specialist? If yes, please give details and supporting documents. Yes No
- * Has your child ever received any additional support in school or ever attended additional classes for any learning, social, emotional or behavioural difficulties? Yes No
- * Has your child ever been suspended, asked to leave, or dismissed from school? If yes, please give details. Yes No

MEDICAL INFORMATION

We would appreciate any information that might be relevant to your child's performance in the classroom or during Physical Education lessons and/or swimming lessons. If your answer to the following questions is "Yes" please give details.

* Does your child have any medical condition?

no

* Does your child have any known allergies?

no

* Does your child need regular medication?

no

* Does your child have any special dietary requirements?

no

* Does your child have any physical disability?

no

If your child's Application for Admission to Concord is successful, you will be required to complete a detailed Medical Information Record.

SUBMIT APPLICATIONS

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Submit form successfully!

Close

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