

Application for Admission (Please use BLOCK CAPITALS)

Student Information

First name:			Last name:					
Nick name	ý.							
Date of birth: / Age: Gender: M / F (DD) (MM) (YYYY)						Affix a recent Passport size photograph		
Nationality	Nationality: Passport no.: Student here							
Country of	Country of birth:							
Applicatio	n for admiss	ion to grac	de					
Darrage to a								
Phone:			Relationship: .					
Previous Sch		T - T	ecent first):					
From Mo/Yr.	To Mo/Yr.	Grade Level	Name of School	City	& Country	Language of Instruction		
Brothers/Siste	ers:	Name		Gender (M/F)	Age	Grade in AITIS		
Languages								
Student's nat	tive language		Language spoken	at home				
Father's nativ	ve language		Mother's native lan	guage:				
Student lives with: ☐ Mother and/or Father ☐ Guardian								
Any other in	nformation th	nat will help	o us educate your child:					
•••••	•••••	••••••	·····	• • • • • • • • • • • • • • • • • • • •		•••••		
	• • • • • • • • • • • • • • • • • • • •	•••••		• • • • • • • • • • • • • • • • • • • •				

<u>Father</u>					
Father's nam Status:		◇ Staff		♦ SEC	◇ Non-AIT
AIT Division/	'Employer/sch	nool:		AIT ID number: .	
Father's work	k phone:		Mobile pho	one:	
e-mail addre	ess:				
Status: AIT Division/ Mother's wo	♦ ST Employer/schrk phone:	nool:	◇ FAC Mobile phor	◇ SEC AIT ID number: . ne:	
				ail Mother er	mail (Choose 1 only) <u>Fee</u>
Regular Fee	Rate for NY-Pr	eK (per Semester)	Regular	Fee Rate for KG - C	3.6 (per Semester)
Tuition: 57,2 SCDF: 5,000		250		68,500 THB] 73,5	500
Eligible for	Subsidy		<u> </u>		
1. Perc	entage/Amour	t of Subsidy:			
2. Acco	ount to be char	ged:			
Signa	ature of Unit Sec	retary		Date	
AIT Unit / S	chool / Head	's Approval			
Sign	ature of Dean	/ Director		Date	
AIT HRO (C	Confirmation o	of the Approved	Subsidy)		
Sign	ature of Direct	or		Date	

Parent Information (AIT Staff/Faculty): Capital Letter for Name-Last name

Certification

I acknowledge that the information I have given is true. I understand that it is the responsibility of the parent or guardian to inform the School of any change in status or residence. False or misleading information could cause the dismissal of the child without refund of fees.

AIT International School **MEDICAL FORM**

Child's Name	Birth Date:
Father's Name	Mother's Name:
Address:	Address:
Height Weight	Blood Group:
Vision:	Hearing:
Skin:	Hair (lice):
Limiting Conditions:	
Physician's Signature:	Date:
(If using AIT Medical Clinic, please call fo	r appointment, 02- 524-5286).
MED	ICAL RECORD
Child's Name:	DOB Blood Group
Person to contact in an emergency:	Phone:
Child's regular doctor:	Phone:
Hospital regularly used:	Phone:
(In case of an emergency, if the school c Thammasat Hospital or the AIT Clinic)	annot contact the person above the child will be taken to
Is the child susceptible to any of the fo	llowing?
 ♦ Asthma ♦ Fever ♦ Nose Bleeds ♦ Throat Infections ♦ Other: 	

Food Allergy:
Drug Allergy:
Other Allergy:
Dietary Restrictions:
Visual Problems:
Aural Problems:
Physical Defects:
Health problems that require special attention:
Any Other Relevant Information:

Immunization Record:

Types of Diseases		Date	
DPT (Diphtheria/Pertussis/ Tetanus	3 injections in 1st year.	1 st booster	2 nd booster
OPV	3 injections in 1 st year.	1 st booster	2 nd booster
Japanese Encephalitis	1	2	3
Hepatitis B	1	2	
BCG	1		
MMR (Measles/Mumps/Rubella)	1		
Other			

FEE POLICY AND RATES

WITHDRAL AND REFUND

Parents who need to transfer/withdraw a child from AITIS requires,

- one-month prior notice in writing
- fill and sign 'Clearance form' to issue the Student's Leaving certificate.

In a case the withdrawal is done in the middle of a semester, parents must inform the school before the invoices are sent out. School fees refunds will be granted in accordance with the following conditions and schedule:

- If the child registers for less than four (4) weeks, tuition fee will be reduced by 75%.
- If the child registers for less than eight (8) weeks, tuition fee will be reduced by 50%.
- If the child registers for more than eight weeks, the tuition fee will be charged in full.
- Refund mentioned above does not apply to snack fee (for Pre-K only), SCDF, PTA fund and Technology Fee.

FEE RATES Per Semester

Nursery, Pre-K1, Pre-K2

Status	Tuition Fee	SCDF	Snack Fees Morning	PTA Fee	Lunch Supervision		Snack Fees Day Care	Technology Fee
AIT Student	28,625	2,500	2,200	150	1,500	2,500	1,500	2,500
Staff, FAC	57,250	5,000	2,200	150	1,500	5,000	1,500	2,500
Seconded	57,250	5,000	2,200	150	1,500	5,000	1,500	2,500
Non-AIT	57,250	5,000	2,200	150	1,500	5,000	1,500	2,500

Note: Snack fees may be altered any time without prior notice

KG, G1, G2, G3, G4, G5, G6

Status	Tuition Fee	SCDF /Semester	PTA Fund	Technology Fee
AIT Student	34,250	2,500	150	2,500
Staff, FAC	68,500	5,000	150	2,500
Seconded	68,500	5,000	150	2,500
Non-AIT	68,500	5,000	150	2,500

By signing the application for admission Parents agree to all	admission terms and condition stated above.
Name:	
Signature:	Date:

For more detail information see our website, www.aitis.ait.asia