



Application for Admission

(Please use BLOCK CAPITALS)

Student Information

First name: Last name:	Affix a recent Passport size photograph of the Student here
Nick name:	
Date of birth: / / Age: Gender: M / F (DD) (MM) (YYYY)	
Nationality: Passport no.:	
Country of birth:	
Application for admission to grade	

Person to contact in emergency:

Phone: Relationship:

Previous Schools attended (list most recent first):

From Mo/Yr.	To Mo/Yr.	Grade Level	Name of School	City & Country	Language of Instruction

Brothers/Sisters:

Name	Gender (M/F)	Age	Grade in AITIS

Languages

Student's native language Language spoken at home

Father's native language Mother's native language

Student lives with: ☐ Mother and/or Father ☐ Guardian

Any other information that will help us educate your child:

.....

.....

Parent Information (AIT student) Capital Letter for Name-Last name

Father

Father's name:

Status: ♦ ST ♦ Staff ♦ FAC ♦ SEC ♦ Non-AIT

AIT Division/Employer/school: AIT ID number:

Father's work phone: Mobile phone:

e-mail address:

Mother

Mother's name:

Status: ♦ ST ♦ Staff ♦ FAC ♦ SEC ♦ Non-AIT

AIT Division/Employer/school: AIT ID number:

Mother's work phone: Mobile phone:

e-mail address:

Address in Thailand:

.....

Address in Home Country:

Intended stay at AITIS:

Active email address for communication ☐ Father email ☐ Mother email (Choose 1 only)

Approval from AIT

Student Accommodation Officer's Approval (for AIT Students): Unit/Room#

Signature: Date:

Registry Officer's Approval (eligible for subsidy) **Enrolled since:**

Signature..... Date.....

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 for appointment, 02- 524-5286).

MEDICAL 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 cannot contact the person above the child will be taken to Thammasat Hospital or the AIT Clinic)

Is the child susceptible to any of the following?

- | | | |
|---------------------|------------------|------------|
| ◇ Asthma | ◇ Rash | ◇ Chills |
| ◇ Fever | ◇ Convulsions | ◇ Headache |
| ◇ Nose Bleeds | ◇ Ear Infections | ◇ Colds |
| ◇ 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 1 st 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

WITHDRAWAL 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	Day Care Fee	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