



Tohoku International School

STUDENT APPLICATION FOR ADMISSION

Instructions: Please fill out application completely in English. Attach all reports/transcripts in English.

PERSONAL DATA OF THE STUDENT

Expected Entry Date (MM/DD/YYYY) to TIS: _____ / _____ / _____

Family name: _____ First name: _____ Middle: _____

Date of Birth (MM/DD/YYYY): _____ Age: _____ Current Grade: _____

Gender: _____ Nationality(ies): _____

Language(s) spoken at home: _____

Child's First/ Preferred Language: _____

Child's Other Languages: _____ / _____

FAMILY INFORMATION

Home Address: _____

Country: _____ Zip Code _____

Home Tel: _____

Mobile (mother): _____ Mobile(father): _____

Email (mother): _____ Email (father): _____

Emergency Contact

Name: _____ Relationship to student/family _____

Home address: _____

Home Phone: _____

Mobile: _____

Email: _____

FURTHER INFORMATION

Has your child ever been assessed for or placed in a special educational or gifted program, given an individual educational plan in school or referred to an external agency for support services (e.g. child guidance clinic, private tutoring, speech therapy, psychological assessments, or other)?

YES NO

If yes, please describe and attach documentation.



PREVIOUS SCHOOLING

Name of School/ Kindergarten	Tel. No.	Country	Dates Attended	Language of Instruction

If previous school was an IB MYP/DP School, please write the child's IB identification number: _____

SIBLINGS

Family Name	First/ Given Name	Date of Birth	Current School

PERSONAL DATA OF PARENTS

Father/ Guardian	Mother/ Guardian
Family Name	Family Name
First Name	First Name
Nationality & 1 st Language	Nationality & 1 st Language
Home Address (if different from pg.1)	Home Address (if different from pg.1)
Employer/ Company/University	Employer/ Company/University
Profession/Position	Profession/Position
Work Address	Work Address
Work Tel.	Work Tel.
Special information which will be helpful for the school to know:	
Child lives with ___both parents ___Mother ___Father ___Guardian	

PARENT AND STUDENT REASONS FOR CHOOSING TIS

PARENTS: What are your primary reasons for an International School? Please explain why TIS is the right school for your child.

How long do you anticipate your children will attend TIS?

From: _____ Grades _____ Years _____



STUDENTS (Age 11 and above): In your own words, write about yourself and your dreams for your future.
How can an international school education help you?



- Attach one photograph per applicant (40 mm x 30 mm)
- Attach copy of passport
- Attach photocopy of the last two years school records, reports, and certificates (where appropriate).
- Attach any English Language Test results (if available).
- Attach certified translations of any documents not in English or Japanese.



STUDENT HEALTH INFORMATION

Student Name _____ Grade _____

Date of Birth(MM/DD/YYYY) _____ Blood Type _____ Normal Temperature: _____ °C

Does your child have:

1. Chronic conditions (such as frequent cold, sore throats, ear infections, headaches, other)?

YES NO **If yes, please explain**

2. Complaints of vision or hearing issues?

YES NO **If yes, please explain**

3. Any Allergies? YES NO If yes, Allergy to:

Allergy to: _____ Symptoms: _____

Allergy to: _____ Symptoms: _____

Allergy to: _____ Symptoms: _____

4. Does your child suffer from asthma?

YES NO **If yes, please explain**

5. Does your child suffer from diabetes?

YES NO **If yes, please explain**

6. Does your child presently take any medications?

YES NO **If yes, please explain**

7. Please elaborate on any physical, emotional or other conditions/limitations, which we should be aware of.



PARENT AGREEMENT

Declaration and Agreement

I declare that the information on this application form is true and correct, and I understand that the school reserves the right to reverse any decision regarding admission or enrolment made on the basis of incorrect information. I declare that all information which may be relevant to my child's enrollment to be true. I understand enrolment is conditional on the following:

- Full academic effort with family support and guidance
- Prompt payment of all school fees
- Behavior which is safe and in keeping with the **TIS Mission Statement and its policies.**

I further understand that my child's place in the school may be withdrawn for failure to comply with the requirements outlined above.

Signature of Mother / Guardian _____

Date (MM/DD/YYYY) _____

Signature of Father / Guardian _____

Date (MM/DD/YYYY) _____

PLEASE SEND THE APPLICATION with NECESSARY DOCUMENTS TO:

TOHOKU INTERNATIONAL SCHOOL

Admission Office

7-101-1 Yakata Izumi-ku Sendai, Miyagi

981-3214 JAPAN

TEL: +81(22) 348-2468

FAX: +81(22) 348-2467

E-mail: office@tisweb.net