



APPLICATION FOR ADMISSION 2025 – 2026

APPLICANT INFORMATION

Date of Application:	Start Date:
First Name:	Nickname:
Family Name:	
Date of Birth:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Year Group:	Nationality:
First Language Spoken:	Others Languages Spoken
Current written and spoken English Level	<input type="checkbox"/> Fluent <input type="checkbox"/> Intermediate <input type="checkbox"/> Beginner (If beginner is selected, please chose Extra English below.)
Foreign Languages <input type="checkbox"/> Chinese <input type="checkbox"/> French <input type="checkbox"/> Spanish <input type="checkbox"/> Extra English	

1. PARENT/GUARDIAN INFORMATION

	Parent 1 / Father	Parent 2 / Mother	Guardian
Title			
Family Name			
First Name			
Nationality			
Home Address in Chiangmai			
Marital status			
Child lives with	<input type="checkbox"/> Parent 1	<input type="checkbox"/> Parent 2	<input type="checkbox"/> Guardian
Telephone (Mobile)			
Email			

2. GENERAL / PERSONAL MEDICAL INFORMATION

	YES	NO	N/A
Is your child taking any medication on a regular basis			
Does your child have any physical health limitations?			
Does your child have any food allergy ? (More details below)			
Has your child ever been assessed by an Educational Psychologist due to learning concerns?			
Has your child ever been assessed by an Educational Psychologist due to behavioral concerns?			
Has your child ever been suspended, asked to leave, or dismissed from school?			
Has your child been provided with academic learning support in the past?			
Does your child have a diagnosed disability? (If yes, please attach diagnosis.)			
Does your child have any special needs?			
Does your child have any special musical talent or sport skills?			

If “Yes” to any of above, please describe and also enclose copies of the results:

Please give more details of **food allergy**:

Authorized medication (please ☐ tick here which medicines can be given to your child if necessary that can be administered by the school nurse:

- ☐ for fever
- ☐ for stomach ache (antacid)
- ☐ for headache
- ☐ for cough
- ☐ for allergies / cream

Note: Any required medication beyond over counter medicine shall be administered by doctor at the hospital.

3. ADDITIONAL EMERGENCY CONTACT

Please provide details of an additional contact if parents are unreachable in the event of an emergency

TITLE:	FAMILY NAME:	FIRST NAME:
Relationship to Child		Email address:
Mobile:	Speaks English: <input type="checkbox"/> YES <input type="checkbox"/> NO If No, which Language:	

4. EDUCATION HISTORY

Current Curriculum:	Grade completed before entry:
Current School (Name)	
Address:	
Country:	Principal/Head's Name:
Principal/Head's email:	
Attended from _____ to _____	
Reason for leaving:	School report is attached with this application YES <input type="checkbox"/> NO <input type="checkbox"/>
School Name	
Attended from _____ to _____	
Reason for leaving:	
Has your child undergone any educational psychological assessment or any other educational support assessment? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Attached If yes, please provide full explanation and confirm it is attached to this application What were the result? _____	

The following documents are **required** (*scanned copies are acceptable*)

- | | |
|---|--|
| <input type="checkbox"/> Confirmation of medication
<i>Prescribed by a medical Doctor</i> | <input type="checkbox"/> Photocopy of passport |
| <input type="checkbox"/> Immunisation record card | <input type="checkbox"/> Copy of last 2 years reports from school |

5. PARENT'S CONSENT FOR WEB AND PRINT PUBLICATION OF WORK AND PHOTOGRAPHS

The school may take appropriate photographs and video that may include your son/daughter and will be electronically published or used in printed publication. Published photos will not be accompanied by pupil names unless permission has been sought from the parent.

If you would like your son/daughter to be photographed, or be part of a video or their work electronically published, please tick here ☐

6. HOW DID YOU HEAR ABOUT WINDFIELD FRENCH INTERNATIONAL SCHOOL CHIANG MAI?

- ☐ Family / Friend Recommendation
- ☐ Excellence Scholarship advertisement
- ☐ Referral from Member of School Team
- ☐ Windfield Chiangmai International School Website
- ☐ Social Media: FACEBOOK, IG, TIKTOK, YOUTUBE
- ☐ Billboard
- ☐ School Event

7. SIGNATURE FATHER / GUARDIAN

SIGNATURE MOTHER / GUARDIAN

Print Name	Print name