



APPLICATION FORM List all names recorded in birth certificate or passport

Name of Child

LAST NAME FIRST NAME

MIDDLE NAME NICKNAME

Date of Birth (mm/dd/yy): _____ Age: ____ Years: ____ Months: ____ Sex: ____

Place of Birth (City, Country): _____ Religion: _____

Citizenship (Passport): _____ Country of Permanent Residence: _____

Photo
2x2
Colored
White Background

Date of Application (mm/dd/yy)

PRESENT ADDRESS (in the Philippines)

Address

State/Province, Country Post Code

Home Phone Numbers

FOREIGN ADDRESS (for Foreign Students)

Address

State/Province, Country Post Code

Home Phone Numbers

Applicant is living with: Both Parents Father Mother Guardian

PARENT/LEGAL GUARDIAN INFORMATION

Father Step-Father Legal Guardian
Title: Mr. Dr. Atty. Engr. _____
Last Name: _____
First Name: _____
Middle Name: _____
Citizenship/Visa: _____
Home Address (if different from applicant's address)

Mother Step-Mother Legal Guardian
Title: Ms. Mrs. Dr. Atty. Engr. _____
Last Name: _____
First Name: _____
Middle Name: _____
Citizenship/Visa: _____
Home Address (if different from applicant's address)

Residence Phone Number: _____
Mobile Number: _____
Email Address: _____
Type of Business/Industry: _____
Position: _____
Office Phone Number: _____

Residence Phone Number: _____
Mobile Number: _____
Email Address: _____
Type of Business/Industry: _____
Position: _____
Office Phone Number: _____

To be informed in case of emergency:

Yes No

To be informed in case of emergency:

Yes No

Note: Applicants who will be living with a legal guardian in the duration of the school year are required to submit a **NOTARIZED AFFIDAVIT OF GUARDIANSHIP.**

EMERGENCY CONTACTS INFORMATION

In case of emergency, every effort is made to contact the student's parents/guardians, however, if this is not possible, the school will attempt to contact the alternative emergency contacts listed below.

Last Name, First Name	Home #	Mobile #	Work #	Address	Relationship to the child

SCHOLASTIC AND DEVELOPMENTAL INFORMATION

1. Your child's English reading and writing level: Fluent Good Limited None
(as appropriate to age and grade level)

2. Your child's English speaking level: Fluent Good Limited None
(as appropriate to age and grade level)

3. Major languages used at home: a. _____ b. _____ c. _____

4. Has your child ever had a psycho-educational assessment or had received remedial help in previous school or developmental institution? (eg. Retained in a Grade Level, Speech Therapy, Occupational Therapy, Special Education, Behavior Mod, IEP, IDP, etc.)

If yes, please explain in detail and provide the latest evaluation, IEP report and/or any other assessments or documents related to the support provided.

5. Has your child ever been asked to leave school because of any behavioral/disciplinary problems? If yes, please explain.

6. Does your child have any special talent or interest in?

- Band (instrument?) _____
- Strings (instrument?) _____
- Vocal or Chorus Drama Art Dance Technology Science Projects
- Student Government Campus Journalism
- Athletics (favorite sports?) _____
- Other special talents or interests: _____

7. Please help us understand your child's school history by completing the following chart. List all schools your child has attended. Begin with the latest year of schooling.

Name of School and Location	Academic Year (month, year to month year)	Child's Age	Language of Instruction
	to		
	to		
	to		
	to		
	to		
	to		

REQUIRED INFORMATION: Provide (print) the name and telephone number of the Head or Principal of your child's current or most recent school. Britesparks International School reserves the right to contact the previous Head of School directly for further information on a student and/or for clarification of documents submitted.

Head of School: _____ Phone Number: _____

TUITION & FEES PAYMENT INFORMATION

The billing statement should be sent to (may be more than one):

Company of _____ Father Mother Legal Guardian

Billing Address for Parent(s)

Please check is same as Residential Address, if not, please specify:

Billing Information for Company-Sponsored Children

Sponsor : _____

Addressee : _____

Address : _____

Contact Number : _____

STATISTICAL

Reason(s) for transfer (kindly check all that applies):

- | | | |
|---|--|---|
| <input type="checkbox"/> International Curriculum | <input type="checkbox"/> Business Management Program | <input type="checkbox"/> School Environment |
| <input type="checkbox"/> Progressive Approach | <input type="checkbox"/> Proximity | <input type="checkbox"/> English Programs |
| <input type="checkbox"/> Small Class Size | <input type="checkbox"/> Good Feedback About BIS | <input type="checkbox"/> Others: _____ |

Where have you heard about BIS? (kindly check all that applies):

- | | | |
|---------------------------------------|--|--|
| <input type="checkbox"/> Website | <input type="checkbox"/> Friend | <input type="checkbox"/> Teacher |
| <input type="checkbox"/> Social Media | <input type="checkbox"/> Print Ads/Billboard | <input type="checkbox"/> Student |
| <input type="checkbox"/> Relative | <input type="checkbox"/> On-air Ads | <input type="checkbox"/> Others: _____ |

DECLARATION

The information on this form is supplied on the understanding that:

- Failure to provide complete and accurate information of any kind on this form will void the application and may result in the student being permanently withdrawn from roster of Britesparks International School.
- Britesparks International School reserves the right to determine the placement of the applicant that is most appropriate to the student's level.
- By signing this application form, the parent gives permission to BIS to contact previous schools to request additional information (eg. academic, medical, developmental progress) that is within school policy, as it may be used for considering the admission of the applicant.

The information submitted herein is true and correct to the best of my knowledge.

Signature of Parent/Guardian
over Printed Name

Signature of Parent/Guardian
over Printed Name

Date (mm/dd/yy)