Global Wisdom
International School

GLOBAL WISDOM INTERNATIONAL SCHOOL

2018-2019 PRE-SCHOOL AND KINDERGARTEN ADMISSION FORM

Child's Name (English) : _____
First *Middle* *Last*

（漢字） : _____
性 名

(Paste 3x 4 cm Photo)

Birthdate: ____ / ____ / ____ **Gender:** ☐ *Boy* ☐ *Girl*
Day *Month* *Year*

Nationality as stated in Passport(s): _____

Language (s): (*1st*)_____(*2nd*)_____(*3rd*)_____

Contact Number: (*Home Tel*)_____-_____-_____ (*Mobile*)_____-_____-_____

Address in Japan: _____

_____〒_____-_____

How will Child travel to School : ☐ *Train* *Station*_____ *Line*_____ ☐ *Walk* ☐ *Car* ☐ *Bus*

Permanent Address(*Outside Tokyo/Outside Japan*): _____

_____〒_____-_____

Dietary Restrictions or Food Allergies: _____

Blood Type :_____ **Toilet Training :** ☐ *Completed* ☐ *In Progress* ☐ *Diapers*

Medical Condition(Specify) : _____

Program Choice (Please Select ① or ②)

①Full Day School 9:00 - 14:00 ☐
②Half Day School 9:00 - 12:00 ☐

Weekly Frequency(Please select from below)

☐ ☐ ☐ ☐ ☐
1 / 2 / 3 / 4 / 5 Days in a Week

Guardian's Information:

Guardian/Father Name: _____
Guardian/Father Phone#: _____
Guardian/Mother Name: _____
Guardian/Mother Phone#: _____

Reference/Emergency Contact:

Name1: _____
Phone#: _____
Name2: _____
Phone#: _____

Has the child had previous school experience? Yes No
If yes, please list name of school(s)

_____

Parent Signature: _____
Submission Date: _____