

APPLICATION for ADMISSION

Qingdao No.1 International School of Shandong Province

232 Songling Road, Qingdao, 266101 China

Phone: 86 (532) 8890-9802, 6889-8888

Fax: 86 (532) 8890-8876

Email: admissions@qiss.org.cn

Web site: www.qiss.org.cn

Attach photo here

Application for Admission to Grade _____

Today's Date _____

Desired Start Date _____ / _____ / _____
DAY MONTH YEAR

Is this your first application to QISS? YES _____ NO _____ (If no, year applied: _____ for Grade _____)

STUDENT INFORMATION

APPLICANT'S NAME _____ , _____ (_____)
FAMILY NAME FIRST NAME MIDDLE ENGLISH NAME

Date of Birth _____ / _____ / _____ **Gender:** Male Female **Nationality:** _____
DAY MONTH YEAR

Passport No. _____ Date of Issue _____ / _____ / _____ Date of Expiration _____ / _____ / _____
D M YR D M YR

EDUCATIONAL INFORMATION

Student's First Language _____ Second Language _____

Number of Years of Studying English as a Second or Foreign Language _____

All Previous Schools Attended (Most Recent First)

Name of School	City and Country	Language of Instruction	From: Mo / Yr	To: Mo / Yr	Grade Level(s)

PARENT / GUARDIAN INFORMATION

Father / Male Guardian's

Mother / Female Guardian's

Name _____ , _____
FAMILY NAME FIRST MI

_____ , _____
FAMILY NAME FIRST MI

Nationality _____

Employer _____

Position _____

Qingdao Address _____

Home Telephone # _____

Mobile Phone # _____

Email: _____

Please circle your preferred email and phone number above.

OTHER CHILDREN

(Please list the applicant's brothers and sisters)

Family Name	Given Names	Birth Date	Grade	School	Location

OFFICE USE ONLY

Date **Application** Received: ___ / ___ / ___
D M YR

Passport copy: YES - NO

School Records: YES - NO

Scheduled for **Interview:** YES or NO

Date of Interview: ___ / ___ / ___
D M YR

Reason for not scheduling interview:

Scheduled for **Placement Test:** YES or NO

Date of test: ___ / ___ / ___
D M YR

Reason for not scheduling test:

Application Processing Fee (2000rmb) YES or NO

Date: ___ / ___ / ___
D M YR

Accepted for Admission to Grade: _____

Wait listed

Denied Admission

Parent notified of Results: Date: ___ / ___ / ___ by: _____ via PHONE EMAIL LETTER
D M YR

Entered in Centre: Date: ___ / ___ / ___ by: _____
D M Yr

Cum File created: Date: ___ / ___ / ___ by: _____