

APPLICATION FORM

School Year of Entry: 20__ - 20__

SCHOOL USE ONLY

Date Received:	Application Fee:	GenCE School:	Sibling:	Interview Date/Time:	Entering Year Level:
----------------	------------------	---------------	----------	----------------------	----------------------

(Please complete the form in English and in BLOCK LETTERS)

1. Child's Information

Surname:	First Names:	Preferred Name:	<p><i>Please attach a recent passport size photo here</i></p>
Date of Birth: ___ / ___ / ____ (DD/MM/YYYY)	Place of Birth:	<input type="checkbox"/> Female <input type="checkbox"/> Male	
Nationality (1):	Passport Country: Passport No.:	HK Permanent Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Nationality (2): (if applicable)	Expiry: ___ / ___ / ____ (DD/MM/YYYY)	Visa Type: <input type="checkbox"/> Dependent <input type="checkbox"/> Student	
Residential Address: Flat ____ Floor ____ Block ____	Name of Building:	Number and Name of Street:	
District:	Area: <input type="checkbox"/> HK Island <input type="checkbox"/> Kowloon <input type="checkbox"/> NT	Home Tel. No.:	
Does the applicant live with both parents? If no, please provide details and state with whom he/she lives.		<input type="checkbox"/> Yes <input type="checkbox"/> No	Year Level into which admission is sought: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7

2.1 Family Information

	<input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Preferred Contact	<input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Preferred Contact
Full Name (Surname, First Name):		
Marital Status:		
Nationality:		
Occupation/Position:		
Company Name:		
Company Address:		
Office Tel. No.:		
Mobile No.:		
Preferred Email Address:		
Religion:		

2.2 Siblings (Please list the full name of applicant's brothers and sisters)

Name	Age	Current Year Level	School	GenCE school's alumni?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

3. Child's Educational Information

Name of Current School:

Year Level(s) at this School:

From: _____ To: _____

Period (MM/YYYY):

From: ____/____ To: ____/____

Language of Instruction:

Address:

Tel. No.:

Fax No.:

Email:

Name of Previous School(s):

Year Level(s) at this School:

Period (MM/YYYY):
From / To

Language of Instruction:

Has the applicant repeated or advanced any year level(s)? Yes No

If yes, which one(s)? _____

If yes, please provide details.

4. Child's Language Information (Please ✓ as appropriate)

English					Mandarin				
	Speaking	Listening	Reading	Writing		Speaking	Listening	Reading	Writing
Beginning					Beginning				
Developing					Developing				
Fluent					Fluent				
Child's First Language:	<input type="checkbox"/> English <input type="checkbox"/> Cantonese <input type="checkbox"/> Mandarin <input type="checkbox"/> Other _____								
Father's/Guardian's First Language:	<input type="checkbox"/> English <input type="checkbox"/> Cantonese <input type="checkbox"/> Mandarin <input type="checkbox"/> Other _____								
Mother's/Guardian's First Language:	<input type="checkbox"/> English <input type="checkbox"/> Cantonese <input type="checkbox"/> Mandarin <input type="checkbox"/> Other _____								
Language Spoken at Home:	<input type="checkbox"/> English <input type="checkbox"/> Cantonese <input type="checkbox"/> Mandarin <input type="checkbox"/> Other _____								

5. Child's Additional Interests

Please feel free to provide details of special interests and/or abilities that the applicant has (e.g. sports, music, arts). Is there any

additional information about the applicant that may be helpful to the Admissions Team, such as talents, hobbies, personality, etc.?

6. Child's Additional Information (Please ✓ as appropriate, and attach a separate sheet if necessary)

Does the applicant have any significant health or physical concerns, allergies, or past injuries? Yes No

Does the applicant take any prescribed medicine regularly? Yes No

If yes, please explain: _____

Has the applicant undergone any evaluative assessment or received any services for learning support (e.g. speech/language, occupational therapy, motor skills, counselling, behavioural, gifted programme, etc.)? Yes No

If yes, please provide details and include a copy of the most recent medical or educational psychologist's report:

Are you aware of any learning and/or behavioural issues which might affect the applicant's performance in class? Yes No

If yes, please explain: _____

Please supply information of anything that may affect the applicant (e.g. death of a parent/relative, separation, adoption).

7. Other Helpful Information

How did you learn about Island Christian Academy?

Website Advertisement IslandCA Parents Relocation Agent Friends Other _____

Please indicate why you chose Island Christian Academy for your child:

Have you previously applied to Island Christian Academy? Yes No

Have you attended a School Tour at Island Christian Academy? Yes No When (MM/YYYY)? ____/____

8. Parental Acknowledgment and Agreement

1. I fully understand that:

- Island Christian Academy (IslandCA) is a Christian school.
- My child will be taught about the Bible, and will attend chapel programmes.
- Students/parents of other faiths and persuasions will be asked to respect this.

2. I agree to support IslandCA's ethos and philosophy.

3. I agree to abide by the rules and regulations of IslandCA and the jurisdiction of the laws of Hong Kong.

4. I hereby authorise IslandCA to contact my child's current/former school(s)/kindergarten(s) to request relevant information about him/her.

5. In case of individual educational needs (see Section 6), I hereby authorise IslandCA to contact the professionals in connection with my child's intervention.

6. I understand that IslandCA has the sole, exclusive, and final right to administer selective enrolment of students in the best interests of the school.

7. I understand that all admission results are final and that IslandCA is not under any obligation to disclose information or documentation relating to the admissions review process.

8. I understand that only complete applications, including submission of application fee and all required documents, will be processed, and that an interview is required for admission.

9. I understand that an applicant cannot be enrolled at IslandCA unless at least one parent/legal guardian is in full-time residence in Hong Kong. I agree that the applicant will be living with at least one parent/legal guardian while enrolled at IslandCA.

10. I understand that the application fee is non-refundable, non-transferable and non-deferrable.

11. I hereby give my consent for IslandCA to use my personal data for the purpose of processing my child's application for admission.

12. I declare that the information provided in this application is true, complete and accurate. I understand that failure to provide true, complete and accurate information may result in immediate withdrawal of the applicant's admission and dismissal from IslandCA.

Signature of Parent/Guardian: _____ Name of Parent/Guardian : _____

Date (DD/MM/YYYY): _____

APPLICATION CHECKLIST

(Please submit this application form with all supporting documents listed below)

<input type="checkbox"/> Completed and signed application form	<input type="checkbox"/> Application Fee in the amount of HKD\$2,000 per applicant paid either by: <ol style="list-style-type: none"> Cheque made payable to "Island Christian Academy" Bank deposit into the account as follows (please submit the original deposit slip confirming payment of the application fee): <p>Bank: The Hong Kong and Shanghai Banking Corporation Limited Bank Address: HSBC Main Building, 1 Queen's Rd Central, Hong Kong Bank Code: 004 Account Name: Island Christian Academy Account Number: 848-333118-001 S.W.I.F.T. Code: HSBCHKHKKH</p>
<input type="checkbox"/> One recent passport size photo attached to this form	
<input type="checkbox"/> Copy of applicant's birth certificate, passport and HK ID (if applicable)	
<input type="checkbox"/> Copy of applicant's valid HK visa stamp (if applicable)	
<input type="checkbox"/> Copy of BOTH parents' passport and HK ID (if applicable)	
<input type="checkbox"/> Copy of school reports (in ENGLISH) from the last two academic years	
<input type="checkbox"/> Copy of most recent medical or educational psychologist's report (if applicable)	

Please submit the completed application pack to the Admissions Office either in person or by post to the following address:

Island Christian Academy
70 Bridges Street
Sheung Wan, Hong Kong