

# Application for Admission 入学申请表

## Student Information 个人资料

Please use BLOCK LETTERS to complete this form 请用正楷填写表格

Family Name (as in passport) 姓 (护照姓名)		Share two recent passport photos 近期照片粘贴处
Given Name(s) (as in passport) 名 (护照姓名)		
Preferred Name (班级内选用名)		
Date of Birth 生日 Year 年 / Month 月 / Day 日	Gender 性别 <input type="checkbox"/> M 男 <input type="checkbox"/> F 女	
Nationality 国籍	Place of Birth 出生地	
Passport Number 护照号码	Date of Expiry 护照到期日. Year 年 / Month 月 / Day 日	
Home Address in Guangdong and/or 在广东的家庭住址/或者 <input type="checkbox"/> interested in Boarding option 选择寄宿项目		
Home Address in Home Country 所属国家家庭住址		
Proposed Date of Entry to ZIS 申请入学时间	Year Level Applying for 申请年级	

## Educational Information 学生教育经历 (由距今最近的就读学校开始填写)

Name of the School 就读学校名称	City & Country 就读国家及城市	Language of Instruction 授课语言	Type of School 学校授课体系	Grades 就读年级	Dates Attended 就读时间
			<input type="checkbox"/> IB <input type="checkbox"/> US <input type="checkbox"/> UK <input type="checkbox"/> HK <input type="checkbox"/> China <input type="checkbox"/> Other		
			<input type="checkbox"/> IB <input type="checkbox"/> US <input type="checkbox"/> UK <input type="checkbox"/> HK <input type="checkbox"/> China <input type="checkbox"/> Other		

## Educational/Language Profile 教育/语言描述

Parent/guardian's assessment of child's fluency in English (Please tick the box as applicable to your child)  
家长/监护人对孩子英语流利程度的评估 (请在符合您孩子情况的方格内打钩)

	Fluent 流利	Intermediate 中等水平	Beginner 初学水平
Spoken English 英语口语			
Writing ability 写作能力			
Reading ability 阅读能力			



Parent/guardian's assessment of child's fluency in other languages (Please tick the box as applicable to your child)  
 家长/监护人对孩子其它语言流利程度的评估 (请在符合您孩子情况的方格内打钩)

Other Language 其它语言	Fluent 流利	Intermediate 中等水平	Beginner 初学水平

## Family Information 家庭资料

Siblings 兄弟姐妹:

Name 姓名	Year Level 班级	Current School 现就读学校	Applying to ZIS? 是否申请加入 ZIS ?

	Father/Guardian 父亲	Mother/Guardian 母亲	Emergency Contact 紧急联络人
Family name 姓			
Given name(s) 名			
Citizenship 国籍			
Passport # 护照号码			
Residence permit# 签证号码			
Email address 电子邮箱			
First Language 第一语言			
Other Languages 其他语言			
Job title 工作职位			
Company Name 公司名字			
Company Address 公司地址			
Business telephone 公司电话			
Zhuhai/China Mobile 珠海/中国手机号码			
Contact Priority 与学校联系的家庭联系人	<input type="checkbox"/> First 第一 <input type="checkbox"/> Second 第二	<input type="checkbox"/> First 第一 <input type="checkbox"/> Second 第二	
Zhuhai/China Home Phone 珠海/中国家里电话			

Please indicate any legal custody restrictions.  
 如果学生父母离异, 请说明法律监管规定。



## Student Special Educational Needs 学生特殊教育需求

Please indicate whether your child has been diagnosed as having any of the following Special Educational Needs:  
申请人接受过下面这些特殊测验中的哪些？

- Attention deficit / hyperactivity disorder (ADD/ADHD) 多动症, 注意力不集中症 (ADD/ADHD 测试)
- Autism spectrum disorders (ASD) and Asperger syndrome 自闭症 (ASD 测试)
- Behavioural, emotional and social difficulties (BESD) 行为、情绪及社交困难症(BESD)测试
- Cognitive impairment: Moderate learning difficulties (MLD) 认知障碍症：中度学习障碍(MLD)测试
- Cognitive impairment: Severe learning difficulties (SLD) 认知障碍症：严重学习障碍(SLD)测试
- Profound and multiple learning difficulties (PMLD) 深度和多重学习困难测试(PMLD)
- Down's syndrome 唐氏综合症测试
- Gifted and talented 天才测试
- Hearing/Vision impairment 听力和视力障碍测试
- Mental health issues 心理健康问题测试
- Physical impairment 身体物理损伤测试
- Other learning difficulties 其它学习困难测试
- Sensory integration disorder 感统失调测试
- Speech and language communication difficulties 语言沟通困难测试
- Any difficulty in previous schools 在以前学校学习期间是否有任何困难

If you have ticked any of the above boxes, please provide the school with corresponding reports / documents  
如果你在上述情况中勾画过任何一项, 请提供相关报告/文件

## Student Health History 学生健康记录表

Student's Name (姓名) \_\_\_\_\_ Date of Birth (生日) \_\_\_\_\_

Please check the immunizations your child has received and attach a copy of the child's immunization record:  
家长请检查孩子接受过什么样的免疫治疗并请附加孩子的免疫记录复印件：

- Measles / Mumps / Rubella 麻疹 / 腮腺炎 / 风疹疫苗
- Polio 麻疹症
- Diphtheria / Tetanus 白喉 / 破伤风
- Typhoid 伤寒
- TB 肺结核
- Pertussis (Whooping Cough) 百日咳
- Hepatitis B B型肝炎

Does your child have any of the following? 你孩子有下面的健康问题吗？

- Frequent headaches 经常头疼
- Eye/Ear Problems 眼睛或耳朵疾病
- Neurological Disorder 神经失调
- Stomach problems 胃病
- Skin Condition 皮肤病
- Diabetes 糖尿病
- Asthma 哮喘
- Epilepsy 羊癫风
- Tuberculosis 肺结核
- Heart Disease 心脏病
- Other 其他
- Allergies 过敏

Please attach any relevant information or medical reports to explain any issues checked above or any other medical issues the school should be aware of. 请附加与上述有关的学生健康资料或值得学校注意的健康问题。

Does your child have any conditions which limit physical activity?

你孩子有什么健康问题会影响体育活动吗？

Yes 是  No 否

If yes, explain 如有, 请详列 \_\_\_\_\_

Does your child wear glasses or contact lenses? 你孩子带眼镜或隐形眼镜吗？

Yes 是  No 否

Does your child routinely take medication? 常规服用医药吗？

Yes 是  No 否

If yes, explain 如有, 请详列 \_\_\_\_\_

Note: All medicine must be administered by the school nurse and stored with the school nurse. Advise the school nurse in written form with student's name, the reason for giving the medication, dosage, time and for how many days.

注意:所有药物必须由学校护士管理, 并存放于学校护士处。请以书面形式通知学校护士, 并写明学生姓名、用药原因、剂量、服药时间和服药天数。

In the event of an emergency your child will be taken to Zhong Shan University Affiliated Hospital # 5 for emergency treatment unless otherwise requested by the parent/guardian. Please provide two emergency contacts.

除非家长或监护人另有要求, 否则在紧急情况下您的孩子将被送往中山大学附属第五医院接受治疗。请提供两个紧急联系人信息。

1. Emergency contact name 紧急联络人姓名: \_\_\_\_\_ Mobile 手机: \_\_\_\_\_

2. Emergency contact name 紧急联络人姓名: \_\_\_\_\_ Mobile 手机: \_\_\_\_\_



## Transportation 校车

ZIS provides a bus service to and from school. Regular school buses are provided on school days (mornings and afternoons). A signed School Bus Service Contract is required if your child will use this optional service.

ZIS 提供往返学校的校车服务。学校于上课日(上午及下午)提供定时校巴。如果您的孩子选择使用校车服务, 您需要签署校车服务合同。

No, my child will not need ZIS bus service

否, 我的孩子不需要校车服务

Yes, my child will need ZIS bus service

是, 我的孩子将需要校车服务

School bus payment is made by  Family  Company

校车费用将由  家庭  公司 支付

## Meals 餐食

Daily salads and hot meals featuring Asian and Western recipes. This is optional for families who wish to pack their own snacks and lunches. We are happy to work with special dietary requirements

学校餐厅每天提供亚洲风味及西式沙拉和热食。您也可以选择自己为孩子准备点心和午餐。我们很乐意为您提供特殊要求的饮食。

No, my child will not need meal service

否, 我的孩子不需要在学校用餐

Yes, my child will need meal service

是, 我的孩子将在学校用餐

Meal service payment is made by  Family  Company

餐费将由  家庭  公司 支付

## School Fees 学费

In accordance with the published fee policy, payment is made by  Family  Company

根据已公布的收费政策, 学费将由  家庭  公司 支付

Preferred payment frequency:

学费支付方式:

Annually in advance (due by August 20 of each year)  
提前支付一年学费 (每年 8 月 20 号前支付)

Half-yearly in advance 提前半年支付  
(due by August 20 and January 20 each year)  
分别在每年八月二十号前和一月二十号前支付

Please advise the currency you are likely to use for your payment/s: 请勾选您要使用的付款币种

RMB 人民币  US Dollar 美元  Euro 欧元

Please nominate the likely method of payment  
请勾选您要使用的付款方式

Cash 现金  Bank Transfer 转账/汇款

If school fee payment is made by company, please provide full details:

如果学费将由公司支付, 请提供以下详细信息:

Contact Person 联络人: \_\_\_\_\_

Email 邮箱: \_\_\_\_\_

Tel 电话: \_\_\_\_\_

Name of company (for official receipt / Chinese *fapiao*)  
公司名称 (收据/发票抬头)

Company address (*fapiao* mailed on request)  
公司地址 (发票邮寄地址)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A payment Invoice will be issued by email from the Finance Office 10 working days after the application form is received. Please pay the school fee according to the bank account information outlined in the payment invoice.

收到入学申请表约 10 个工作日后, 我校财务将会通过邮件给您发送详细的学费付款通知, 请按照付款通知上面的银行账户信息支付学费。

Finance Office contact 财务办公室请联络: jennyw@zischina.com +756 3221005

*At ZIS we strive to develop dynamic and principled global citizens who have the skills and attitudes to enable them to become compassionate life-long learners who will contribute positively to the future of our world.*

*在 ZIS, 我们致力于培养与时俱进的具有各种技能及远见的国际公民, 让他们成为富有同情心的终身学习者, 在将来为我的世界做出积极的贡献。*



ZHUHAI  
INTERNATIONAL SCHOOL



## Application Checklist

ALL of the following must be received before the selection process begins:

- Payment of non-refundable application fee of ¥3000 RMB
- A completed and signed application form
- Copies of these **student** documents:
  - passport
  - birth certificate (English translation)
  - residence permit
  - immunization record
  - two passport sized photos
  - official school reports and certificate of attendance from past two school years (English translation)
  - specialist reports of Special Education Needs
- Copies of these **parent** documents:
  - passport
  - residence permit
- A complete confidential reference form from student's previous school (Application for Admission Part 2) faxed/emailed/mailed to Admissions Office at ZIS directly.

We understand that a family outside of mainland China may not have a Chinese visa or residence permit yet. You can submit your passport copies first and email visa or residence permit copies once they are available.

我们理解中国大陆以外的家庭可能还没有中国签证或居留许可。您可以先提交您的护照复印件，一旦有了签证或居留许可复印件，请通过电子邮件发送给我们。

Yes 是  No 否 I have read the above information and fully understand and accept it. I guarantee that all the student information and documentation supplied is authentic and relevant documentation has not been withheld.  
我已阅读以上资料，并且理解和接受所有内容。我保证所提供的学生信息真实并且没有任何隐瞒。

Yes 是  No 否 I have reviewed and fully understand the ZIS Fee Policy.  
我已经阅读并且完全理解 ZIS 的收费政策。

Yes 是  No 否 I have received and reviewed the ZIS Student Parent Handbook.  
我已经收到并且阅读了 ZIS 学生和家長手册

Yes 是  No 否 I give permission for ZIS to initiate emergency measures in the event of accident or sudden serious illness. I also give permission for the school health staff to dispense routine first aid to my child for conditions such as cuts, abrasions, stomach ache, and headache. I affirm that all information given in this application is complete and accurate. I understand that I am responsible for all medical fees incurred.  
我允许 ZIS 在发生意外或突发严重疾病时采取紧急措施。我还允许学校的卫生工作人员在发生如割伤、擦伤、胃痛和头痛时对我的孩子进行常规急救。本人确认在此申请表中所提供的资料是完整和完全正确的。本人明白发生的一切医疗费用将由本人负责。

Yes 是  No 否 I grant ZIS and the International Baccalaureate license to use my child's school work in any medium for training, promotional or other purposes in relation to their activities. I also grant ZIS and the IBO permission to reproduce photographic and video images of my child for promotional or other purposes in relation to their activities. This includes school publications e.g. yearbook, newsletters, WeChat articles, and advertising.  
本人授权 ZIS 及国际文凭组织(International Baccalaureate) 在任何媒体上进行培训、宣传或其他相关目的的活动中使用我的孩子的学校作业。我还允许 ZIS 和 IBO 复制我的孩子的照片和视频图像，在他们的宣传以及其他相关目的的活动中使用。这一授权同样适用于学校出版物，例如学校年鉴、简报、微信文章和广告。

Yes 是  No 否 I give permission for my child to attend school field trips, noting that the school will issue a special notice to inform me in advance of the excursion.  
我允许我的孩子参加学校的实地考察旅行，同时学校也会发出特别通知提前告知我出行情况。

Signature of Parent 家长签名 \_\_\_\_\_ Date 日期 \_\_\_\_\_

## 学校申请材料清单

学校需要收到下面所有的资料才能开始学生的入学甄别程序:

- 报名费 (不可退还) 3000 元人民币。
- 完成并签名的申请表。
- 以下**学生**资料的复印件：
  - 护照
  - 出生证 (英文翻译)
  - 签证或居留许可
  - 免疫证明
  - 两张护照尺寸照片
  - 最近两年之前就读学校的成绩报告 (英语翻译)
  - 特殊教育需求的专家报告
- 以下**家长**资料的复印件
  - 护照
  - 签证或者居留许可
- 一份完整填写的学生之前就读学校的推荐表格 (不公开) (入学申请第二部分), 请直接传真/电子邮件/邮寄到 ZIS 的招生办公室。

### Admissions Office Use Only

Date Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Application Fee Paid  Yes 是  No 否

Admissions Officer: \_\_\_\_\_

