



To cultivate learners with knowledge, skills, integrity and discernment,
growing in love for God and service to humanity.

STUDENT APPLICATION FORM

Please fill out this form in BLOCK LETTERS.

A. STUDENT INFORMATION				
Surname		Given Names		Attach Photo Here
Preferred Name		Date of Birth MM / DD / YYYY		
Gender <input type="checkbox"/> F <input type="checkbox"/> M	Place of Birth		Ethnicity	
Nationality by Passport (List all passports)		<input type="checkbox"/> HKSAR <input type="checkbox"/> Others _____		
Date of Expected Entry <input type="checkbox"/> August 2020				
Applying Grade <input type="checkbox"/> Preparatory (5 years old on or before August 31 st of the year of entry) <input type="checkbox"/> Grade 1 <input type="checkbox"/> Grade 2 <input type="checkbox"/> Grade 3 <input type="checkbox"/> Grade 4 <input type="checkbox"/> Grade 5 <input type="checkbox"/> Grade 6 <input type="checkbox"/> Grade 7 <input type="checkbox"/> Grade 8 <input type="checkbox"/> Grade 9 <input type="checkbox"/> Grade 10 <input type="checkbox"/> Grade 11 <input type="checkbox"/> Grade 12				
House / Flat No.	Floor	Block	Building Name / Estate	
Street Address				
District	City / State		Country	
Is your child currently residing in Hong Kong? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is your child a Permanent Resident of Hong Kong? <input type="checkbox"/> Yes HKID Card No. _____				
<input type="checkbox"/> No <input type="checkbox"/> Dependent Visa <input type="checkbox"/> Student Visa Visa Expiry Date _____				

B. EDUCATION INFORMATION

Name and Address of Current School:

Current Grade Level:

List of schools attended (from second recent to earliest):

School Name	Class / Grade	Language(s) of Instruction	Dates (From - To)
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Has your child previously applied to CAIS? No Yes Applied Grade & Academic Year _____

Has your child previously attended CAIS? No Yes Accepted Grade & Academic Year _____

C. FAMILY LANGUAGE INFORMATION

* Please check appropriate boxes below.

	English	Cantonese	Mandarin	Others
First / Home Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> ()
Second Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> ()

D. ADDITIONAL STUDENT INFORMATION

	YES	NO
Has your child repeated or been advanced any grades? If yes, please explain.	<input type="checkbox"/>	<input type="checkbox"/>
Has your child ever been seen by an Educational Psychologist / Occupational Therapist / Psychiatrist / Counselor / Speech Therapist or other Specialist? If yes, please give details below and include any reports.	<input type="checkbox"/>	<input type="checkbox"/>
Has your child ever received any special help or ever attended special classes for any learning, social, emotional or behavioral difficulties? If yes, please explain.	<input type="checkbox"/>	<input type="checkbox"/>
Does your child have any health or physical concerns? If yes, please explain.	<input type="checkbox"/>	<input type="checkbox"/>

Please list any medications your child is currently taking that are related to the above questions.

E. PARENTS INFORMATION

Marital Status (Please check appropriate box below):

- Parents Married
 Parents Divorced
 Parents Separated
 Father Deceased
 Mother Deceased
 Father Remarried
 Mother Remarried

	* Father / Guardian	* Mother / Guardian
Title	* Mr / Dr / Prof	* Mrs / Ms / Dr / Prof
Surname		
Given Names		
Preferred Name		
Hong Kong Permanent Resident	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Nationality by Passport		
Religion		
Home Phone Number		
Mobile Phone Number		
Email Address		
Are you a Christian Worker?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Occupation		
Position		
Employer / Company Name		
Work Address		
Work Telephone		
Are you a CAIS alumni?	<input type="checkbox"/> Yes, Graduation Year _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes, Graduation Year _____ <input type="checkbox"/> No
Are you living with your child?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

* Delete if inapplicable

F. SIBLINGS INFORMATION

Full Name (Surname, Given Names)	Gender	Age	School	Grade Level

G. ADDITIONAL INFORMATION

How did you hear about CAIS?

- Through CAIS Families Through Church CAIS Alumni Through friends
 Fundraising Events Relocation Company Online Search Media
 School Fairs Others _____

H. PARENT ACKNOWLEDGEMENT

1. I fully understand that the Application Fee is non-refundable, non-transferable and valid for the applied academic year only. The Application Fee will be processed on the assessment day.
2. I fully understand that CAIS is a Christian school, that my child will be taught Bible, attend chapel programs and that children/parents of other faiths and persuasions will not be allowed to proselytize.
3. I understand that students enrolling at CAIS must hold a valid Hong Kong ID card and/or a valid passport with visa in accordance with regulations of the Hong Kong Education Bureau and Hong Kong Immigration Department. My child will not be permitted to attend school in absence of a valid visa and the School will not refund fees related to the period of such absence.
4. I fully understand that non-disclosure of information regarding any special needs and concerns noted by my child's previous schools or any professionals will result in my child losing his/her position at CAIS.
5. I agree to abide by the rules and regulations of CAIS and the jurisdiction of the laws of Hong Kong.
6. I have read and agree to abide by the CAIS payment policy and to participate in the Capital Note or Capital Levy program as listed on CAIS school website
7. I understand that CAIS has the sole, exclusive and final right to administer selective enrolment of students' application for the best interest of the school.
8. I declare that the information given in this application form is true and accurate and understand that a failure to provide accurate information will result in immediate withdrawal of the applicant's admission and dismissal from CAIS.

* Parent / Guardian's Signature _____

Relationship to the child _____

Date of Application _____

I. SUBMISSION OF APPLICATION

Please send Student Application Form and supporting documents to:

Admissions Office
Christian Alliance International School
33 King Lam Street · Lai Chi Kok · Kowloon · Hong Kong
香港 · 九龍 · 荔枝角 · 瓊林街三十三號
☎ (852) 3699 3862 / (852) 3699 3863
✉ admissions@caisbv.edu.hk 🌐 www.caisbv.edu.hk

The information submitted on this form is being collected with reference to the data protection principles as stipulated in Personal Data (Privacy) Ordinance, Chapter 486 of Laws of Hong Kong, Christian Alliance International School (CAIS) collects and stores the personal data of individuals associated with the school for administrative, academic, pastoral or alumni communication purposes. * Delete if inapplicable