Student Application Package

Munich International School

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www.mis-munich.de

STUDENT APPLICATION GUIDELINES

We hope that the following information will help to guide you in completing your application to Munich International School. The following documents must be submitted, as appropriate, for each prospective student before an application will be considered:

FOR ALL APPLICANTS

Please include the following:

- Application for Admission Form
- Language Background Survey Form (for relevant school)
- Student Support Form (together with any relevant documentation)
- MIS Student Health Form
- Confirmation of Payment of School Fees Form (only if a company/third party is paying for the some or all of the school fees)
- Official school records/reports for the last three school years, including mid-year reports where available. Please also provide any external testing results, if undertaken eg. MAP, ISA, SAT (US), Phonic Assessment (UK) and other related documentation. For younger students, please include as many years of reports as may be available n.b. If the school year has not been completed, please send mid-term grades as of the present date. **All school records/reports must be provided in English. Where translations are required, please include both the original reports and the English translation.**
- Proof of a bank transfer (reference: Application Fee, child's name) or cheque for a non-refundable Application Fee of €255.
  (MIS Bank Details: Kreissparkasse München Starnberg Ebersberg, IBAN No. DE42 7025 0150 0022 8272 73, SWIFT-BIC: BYLADEM1KMS
- Copy of passport
- Recent **colour,** passport-sized photograph

To be completed by a current teacher and returned directly to Munich International School by the teacher
(n.b. it is possible for schools to scan and send this form via email):

- Confidential Recommendation Form

FOR SPECIFIC SCHOOL-LEVEL APPLICANTS

For Junior School Applicants
(Early Childhood EC 45 & 56, Grades 1-4)

- **FOR ALL APPLICANTS FOR EC 45 AND EC 56**
  A Booking Agreement Form indicating the preferred/intended length of school day is required.
- **FOR ALL APPLICANTS FOR EC - GRADE 4**
  Two recent samples of work from the current school year, one each in writing and in mathematics, or two pieces of artwork/number work for younger children.

For Middle School Applicants
(Grades 5-8)

- **FOR ALL APPLICANTS FOR GRADES 5-8 WHOM ENGLISH IS NOT THEIR MOTHER TONGUE**
  In the Middle School, we have English classes ranging from beginners to native speaker levels of ability. In order to help us plan for and place students appropriately in our programme, please include a hand-written writing sample in English. This must be a piece of writing that the student has completed **by hand, without any help and without the use of a dictionary.** It can be printed or written in cursive writing. This can be a piece of writing which has been completed in English class in school or at home.

For Senior School Applicants
(Grades 9-12)

- **FOR ALL APPLICANTS FOR GRADES 9-12**
  A completed subject selection form.
- **FOR ALL APPLICANTS FOR GRADES 9-12 FOR WHOM ENGLISH IS NOT THEIR MOTHER TONGUE**
  These applicants will be asked to sit a written English test which can be taken under supervision at their current school. Further information and advice about these arrangements will be provided by the Admissions Office.
- **FOR ALL APPLICANTS FOR GRADES 10-12**
  Statistical Survey on financial status (Grades 10 through 12 only).
- **FOR ALL APPLICANTS FOR GRADES 11-12**
  Information regarding parents or guardians consent for school documents.

FOR ALL APPLICANTS NOT LIVING WITH THEIR PARENTS

- **FOR ALL APPLICANTS NOT LIVING WITH THEIR PARENTS** - A Host Family Agreement Form will need to be completed, copies of which are available from the Admissions Office on request.

STUDENT APPLICATION GUIDELINES

Student applications will be processed as follows:

1. Parents/Guardians are invited to submit an application form together with any relevant forms and documentation mentioned overleaf. It is understood that submitting the signed application does not oblige the School to accept the student. Families are also welcome to visit the School as part of the application process, but this is not a requirement.

   By signing the *Application for Admission Form,* the parent(s) and/or guardian(s) certify that, at the time of application/admission, all information pertinent to a) the testing and admission of a student to Munich International School, and b) the parent(s)'/guardian(s)' financial circumstances, as required by legal provisions, have been disclosed. Parental signature also provides permission to Munich International School to conduct informal assessments for admission and placement as required.

   n.b. Failure to provide accurate translations of academic documents, or to declare accurately and fully any assessments or evaluations made for educational support (e.g. special education or gifted programmes, individual educational plans, child guidance clinics, private tutoring, speech therapy, psychological assessment, etc.) and/or a student's psychological/medical background may affect the School's ability to offer the best possible education for the student, and may result in the annulment of the application or the School's acceptance offer, or the student may be required to withdraw from MIS. Falsification of documents or omission of pertinent information will result in the (retroactive) annulment of the application or the School's acceptance offer; enrolled students would then be required to withdraw from MIS.

2. The School will acknowledge this application in writing and advise as quickly as possible if there are any further steps or additional information or documentation required eg. an interview and/or testing may need to be arranged depending upon the age, grade level, and language proficiency of the student.

3. If applicable, applications will not be considered without relevant testing documents eg. IEP/psycho-educational testing documents.

4. After reviewing the application, the School will either grant the student admission, offer the student a place on a waiting list, or advise that it is not possible to offer the student a place. Sometimes it may not be possible to offer the student a place owing to the availability of places in the relevant Grade level, or the School may not believe that it has the resources available to assist the student to be successful. In some cases, the offer of a place will be conditional e.g. the need for 1:1 aide, probation period. Such conditions will be set out in writing and will need to be formally accepted in writing by the parents and met (and continue to be met throughout the school year) before the place is confirmed.

5. Students identified with learning needs will be assessed within the first three weeks of school to determine if additional information is needed to provide appropriate support services. The School reserves the right to rescind the offer of admission or re-enrolment if it is determined through further assessment that it cannot provide an effective learning environment for the student.

   Where there are places available and the School believes that it can support a student to be successful, preference will be given to international families, siblings of current students and 'returning' students i.e. students who have previously attended MIS.

   In all cases, the parent(s)/guardian(s) will be advised in writing and sometimes also by phone about the outcome of the application process as quickly as possible. If admission is granted, the School will enclose relevant school contracts with a letter of offer. This contract(s) must be signed and returned to the School within approximately two weeks in order for a student's place to be confirmed. The signing of this contract is binding and an invoice for fees will be issued shortly thereafter, depending upon the time of application and start date.

   If a Bus Transportation Contract has been completed and returned, you will receive a bus schedule with designated bus stops from the Transportation Director.

   Upon acceptance, some Senior School students entering Grades 9-12 will have a Skype, telephone or personal appointment with the Guidance Counsellor or Senior School Assistant Principal for course-scheduling purposes before attending classes. Munich International School will advise how and when such an appointment will be arranged prior to commencement.

Please note that most verbal and written communication with parent(s)/guardian(s) is in English. As needed, parent(s)/guardian(s) will be required, at their own expense to provide for English translation for interviews, parent-teacher conferences, documents etc. Please also note that the School cannot provide any assistance in respect of visa processes.

Parents are also advised not to withdraw their child from his/her current school until his/her place at Munich International School has been confirmed in writing. For more information or assistance, please do not hesitate to contact the Munich International School Admissions Office at admissions@mis-munich.de or +49 8151 366 120/1.

MIS · Munich International School e.V. · Schloss Buchhof · D-82319 Starnberg · Germany
Phone: +49-8151-366-120/1 · Fax: +49-8151-366-129 · Email: admissions@mis-munich.de · www.mis-munich.de
Kreissparkasse München Starnberg Ebersberg · IBAN DE42 7025 0150 0022 8272 73 · BIC BYLADEM1KMS

APPLICATION FOR ADMISSION

Office Use Only
Sibling(s) in/for Grade(s):

For the School Year 20 / 20
Expected Entry Date _____
Expected Length of Stay _____

For Grade _____

PHOTOGRAPH

PERSONAL DATA OF THE STUDENT

Student's Family Name

First Name of Student

Date of Birth (DD/MM/YY)

City of Birth | Country of Birth

Date of Arrival in Germany

Country Prior to Arrival

Citizenship

Sex

Current Grade | Dominant Language

Other Language(s) Spoken

PERMANENT HOME ADDRESS IN GERMANY
(IF KNOWN)

Street

Postal /Zip Code | City

Tel. | Mobile

ADDRESS FOR IMMEDIATE CORRESPONDENCE

Street

Postal /Zip Code | City and State

Country

Tel. | Mobile

OFFICE USE ONLY

☐ **Applicant correct age for Grade:** _____

☐ Sibling(s) applying for Grade(s)
☐ Siblings at MIS in Grade(s)

☐ Returning Student
☐ Alumni of MIS
☐ Re-application

☐ Non-Refundable Application Fee

☐ School Records/Translations
☐ Additional testing documents
☐ Language Background Survey
☐ Student Support Form
☐ Confidential Rec. Form
☐ Early Childhood Booking Form
☐ EC – Gr. 4 Work Samples
☐ Gr.5-8 English Sample
☐ Gr.9-12 English test
☐ Student Health Form
☐ 1 colour photograph
☐ Copy of Passport
☐ Confirmation of Payment Form
☐ Guardianship/Custody
☐ Host Family Agreement
☐ Statistical Survey (Grades 10-12)
☐ Subject Selection Form (Gr.9- 12)
☐ Consent Form for documents (Grades 11-12)

☐ Assessment Time
☐ Interview _____ Time _____
_____ _____

Accepted Grade
Waiting _____ Grade _____
Declined _____ Grade _____
Holding _____ Grade _____
Comments _____ _____
_____
_____
_____

Signed _____ Date _____

_____

Primary email (this email will be used for all MIS communication and invoicing*

I **give/do not** give permission for this email to be published in the MIS Online Directory (accessible to members of the MIS community only)

*All invoices and payment reminders will be sent from accountreceiveable@mis-munich.de. Please ensure that your junk mail filter allows MIS email communication to be received.

APPLICATION FOR ADMISSION

PERSONAL DATA OF THE STUDENT

Name of School/Kindergarten	Tel. Number/Website	Name of Contact	Country	Dates Attended

☐ I/we hereby give MIS permission to contact previous schools

SIBLINGS

Family Name	First Name	Date of Birth	Current School

PERSONAL DATA OF PARENT/GUARDIAN

Parent/Legal Guardian 1

Family Name

First Name

Nationality

Profession/Position

Employer/Company

Home Contact Details (If different from p. 1):

Tel. Mobile

Email

Home address:

Street

Postal/Zip Code City, Country

Parent /Legal Guardian 2

Family Name

First Name

Nationality

Profession/Position

Employer/Company

Home Contact Details (If different from p. 1):

Tel. Mobile

Email

Home address:

Street

Postal/Zip Code City, Country

Emergency Contact (If primary contact is not available)

Name Tel./Mobile

FURTHER INFORMATION

Has your child ever been assessed for, or placed in, a special educational or gifted programme, given an individual educational plan in school or referred to an external agency for support services (e.g. child guidance clinic, private tutoring, speech therapy, diagnostic assessment, or other)?

☐ Yes ☐ No

If yes, please attach relevant documentaiton.

Is your child a returning student to MIS?

☐ Yes ☐ No

If yes, please advise: Entry date **Leaving date**

Have you applied to MIS before on behalf of this child?

☐ Yes ☐ No

If yes, please advise us of the academic year, grade level and outcome of the application(s):

School Year: **For Grade:**

☐ **Accepted** ☐ **Declined** ☐ **Waitlisted** ☐ **Withdrawn before entry**

Has your child ever been involved in disciplinary action at school?

☐ Yes ☐ No

If yes, why? Please also attach relevant documentation.

It is assumed that both parents listed on the application form have joint custody and access to the records of the student. Does only one parent hold custoy/guardianship?

☐ Yes, one parent ☐ No, both parents

If only one parent holds custody, please submit custody/guardianship documentation.

PAYMENT INFORMATION

The Application Fee, as stated in the School's Prospectus, must accompany the application form. **We regret that applications cannot be considered until this fee is received. This fee is also non-refundable.**

Please indicate method of payment: ☐ Bank Transfer ☐ Cheque ☐ Company*

***Only in cases where a Confirmation of Payment Form has been completed in full can the up front payment of the Application Fee be waived.**

MIS Bank Details:
Kreissparkasse München Starnberg Ebersberg
IBAN No. DE42 7025 0150 0022 8272 73
SWIFT-BIC: BYLADEM1KMS

Tution Fees will be paid by: ☐ Self ☐ Company ☐ Third Party:

DO YOU HAVE ANY RELATIVES WHO ARE ALUMNI OF MIS?

☐ Yes ☐ No If yes, Name: _____ Year: _____

APPLICATION FOR ADMISSION

HOW DID YOU HEAR ABOUT MIS?

☐ Acquaintance	Name: _____	☐ Personal Recommendation	Name: _____
☐ Business	Name: _____	☐ Internet	Site: _____
☐ Newspaper	Name: _____	☐ MIS Website	Sender: _____
☐ Magazine	Name: _____		
☐ Other	Name: _____		

ADMISSIONS PROCESS

Parents/Guardians are invited to submit an application form together with any relevant forms and documentation mentioned above. It is understood that submitting the signed application does not oblige the School to accept the student. Families are also welcome to visit the School as part of the application process, but this is not a requirement.

The School will acknowledge this application in writing and advise as quickly as possible if there are any further steps or additional information or documentation required eg. an interview and/or testing may need to be arranged depending upon the age, grade level, and language proficiency of the student. If applicable, applications will not be considered without relevant testing documents eg. IEP/psycho-educational testing documents.

After reviewing the application, the School will either grant the student admission, offer the student a place on a waiting list, or advise that it is not possible to offer the student a place. Sometimes it may not be possible to offer the student a place owing to the availability of places in the relevant Grade level, or the School may not believe that it has the resources available to assist the student to be successful.

Where there are places available and the School believes that it can support a student to be successful, preference will be given to international families, siblings of current students and 'returning' students i.e. students who have previously attended MIS.

Disclosure Clause:
By signing the *Application for Admission Form*, the parent(s) and/or guardian(s) certify that, at the time of application/admission, all information pertinent to a) the testing and admission of a student to Munich International School, and b) the parent(s)'/guardian(s)' financial circumstances, as required by legal provisions, have been disclosed.

Failure to provide accurate translations of academic documents, or to declare accurately and fully any assessments or evaluations made for educational support (e.g. special education or gifted programmes, individual educational plans, child guidance clinics, private tutoring, speech therapy, psychological assessment, etc.) and/or a student's psychological/medical background may affect the School's ability to offer the best possible education for the student, and may result in the **annulment of the application or the School's acceptance/offer**, or the student may be required to withdraw from MIS. Falsification of documents or omission of pertinent information will result in the (retroactive) annulment of the application or the School's acceptance offer; enrolled students would then be required to withdraw from MIS.

Signature below indicates agreement to the above disclosure clause, and support for MIS' mission statement and curricular goals as stated in our School Prospectus:

_____

Date

_____

Signature of Parent 1/Legal Guardian 1

_____

Signature of Parent 2/Legal Guardian 2

N.B Data is stored electronically as well as in hard copy. All parties are subject to the legal requirements of Article 85 of the Bay-EUG.

PLEASE SEND THE APPLICATION TO:

Munich International School e. V.
Admissions Office
Schloss Buchhof
D-82319 Starnberg
Germany

Tel.: +49-8151-366-120/121 from outside Germany
Tel.: 08151-366-120/121 locally
Fax: +49-8151-366-129
Email: admissions@mis-munich.de
Website: www.mis-munich.de

LANGUAGE BACKGROUND SURVEY FORM

Child's Name _____ School Year _____

Date of Birth _____ Age _____ Grade Applied for _____

Nationality(s) _____ _____ _____

Child | Parent 1/Legal Guardian 1 | Parent 2/Legal Guardian 2

Child's Dominant Language: Please write the child's dominant language on the line below. (Note: The dominant language is considered to be the child's strongest language. This is usually the language spoken by the child's parents or guardians in the home.) If your child is *fully bilingual* (dominant in two languages), please write both languages.

Dominant Language: _____

Use this chart to help you determine your child's level of skill for each of the languages listed below.

Level	No Skills	Beginning	Intermediate	Advanced	Native
Listening	Has no listening skills in the language	Understands just a little	Understands everyday conversation and can follow basic classroom instructions.	Understands the language almost as well as a native speaker	Understands the language as well as a native speaker
Speaking	Has no speaking skills in the language	Can say a few words or phrases	Can hold a conversation using simple English.	Converses easily with native speakers	Converses as well as a native speaker
Reading	Has no reading skills in the language	Can read simple words or phrases	Can read simple books a few years below grade level in the language	Can read books close to grade level in the language	Can read at or above grade level
Writing	Has no writing skills in the language	Can write simple words or phrases	Writes simple ideas with many mistakes	Independently writes ideas clearly with few mistakes	Can write at or above grade level

English Language Skills: Check the box that best describes your child's level of skill in each area listed below. *Use the chart above to help you.*

ENGLISH	No Skills	Beginning	Intermediate	Advanced	Native
Listening					
Speaking					
Reading					
Writing					

German Language Skills: *Check the box that best describes your child's level of skill in each area listed below. Use the chart above to help you.*

GERMAN	No Skills	Beginning	Intermediate	Advanced	Native
Listening					
Speaking					
Reading					
Writing					

Please turn over and complete additional page.

LANGUAGE BACKGROUND SURVEY FORM

Language(s) spoken with the child by: (If more than one language is used, please give percentage of time for each language).

Parent 1/Legal Guardian 1 _____ Parent 2/Legal Guardian 2 _____

_____ _____

Siblings _____ Others _____

Education: (Please list the schools/kindergartens your child has attended, dates of attendance, grades completed and language(s) of instruction.)

School/Kindergarten	Dates Attended	Grades	Language of Instruction

If your child's dominant language is not English or German, he or she should have some instruction to continue developing the dominant language while living in Germany. What plans do you have to ensure that your child's language continues to develop? (For example, MIS Mother Tongue Programme, Saturday school, tutoring, correspondence courses etc…)

_____

_____

_____

Please add any other information related to your child's language background that might be helpful in planning his or her programme (e.g., In which language did your child first learn to read and write? How many languages can your child read and write in?):

_____

_____

_____

_____ _____

Date Signature of parent or legal guardian

STUDENT SUPPORT FORM

The following information is needed so that Munich International School can determine how we can best support your son/daughter. Please submit any reports, individual education plans, or psycho-educational assessments along with this form. **Where translations are required, please include both the original report and the English translation.**

CHILD'S NAME _____ SCHOOL YEAR _____

DATE OF BIRTH _____ GRADE APPLIED FOR _____

With regard to your child, please give your thoughts on the following (please tick "yes" or "no" for each row):

For all applicants

Behavioural	YES	NO
Poor concentration		
Easily distracted		
Impulsive (does not stop and think before acting)		
Difficulties following directions		
Unusually high or low activity level		
Difficulties with change in routines		
Difficulties organising materials		

For all applicants

Social/Emotional	YES	NO
Problems with self-esteem		
Difficulties relating to peers		
Difficulties with conflict and anger		
Difficulties co-operating and sharing with others		
High levels of anxiety		

For all applicants

Intellectual	YES	NO
Difficulties processing/comprehending information		
Language difficulties/delay in first language		
Difficulties with memory		

For all applicants

Physical Difficulties	YES	NO
Fine motor skills		
Gross motor skills		
Hearing problems		
Sight problems/Wears glasses		
Speech		

Please turn over and complete additional page.

STUDENT SUPPORT FORM

For all applicants

Has your child ever received support from one of the following?	YES	NO
Placed in an extension programme or a Gifted & Talented programme		
Learning Support Teacher/Special Needs Teacher		
Speech Pathologist		
Occupational Therapist		
Psychologist		
Counselor or Therapist		
Has your child ever had an Individual Education Plan?		
Has your child ever had a Psycho-Educational Assessment?		
Has your child previously needed a full-time or part-time individual learning assistant?		
If you answered yes to any of the above, please give details and attach documentation:		

For all applicants

Has your child ever had a diagnosis of:	YES	NO
Autism		
Asperger's Syndrome		
Language Delay		
Developmental Delay		
ADHD/ADD		
Learning Disability - reading, writing, math (please circle)		
Memory concerns (long term and/or short term)		
Processing speed		
Dyslexia		
Dyscalculia		
Do you have any concerns regarding your child's ability to learn? If yes, please comment:		

Other (please specify):

_____

_____

Disclosure Clause:
By signing this form, the parent(s) and/or guardian(s) certify that, at the time of application/admission, all information pertinent to a) the testing, screening and admission of a student to MIS have been disclosed. Failure to provide accurate translations, or to declare accurately and fully any assessments or evaluations made for educational support (e.g. special education or gifted programmes, individual educational plans, child guidance clinics, private tutoring, speech therapy, psychological assesment, etc.) and/or a student's psychological/medical background, **may result in the annulment of the application or the School's acceptance/offer**, or the student may be required to withdraw from MIS. Falsification of documents or omission of pertinent information will result in the (retroactive) annulment of the application or the School's acceptance offer; enrolled students would then be required to withdraw from MIS.

_____
Name of Parent 1/Legal Guardian 1 (please print)

_____
Signature of Parent 2/Legal Guardian 2

_____
Date

STUDENT SUPPORT FORM

For Junior School applicants only

1. Please list the language(s) most often used in the home by the:

   Mother to child _____ Father to child _____

   Parents to each other _____ Sibling(s) to child _____

3. Development milestones:
   As best you can remember, designate the age, in years and months, at which your child started to:

   Speak first words _____

   Crawl _____

   Walk alone _____

   Dress themselves _____

   Tie shoes _____

4. From birth to present day, has your child had any health issues with hearing or speech? If yes, please explain:

   _____

   _____

   _____

5. How is your child's behaviour at home? Which social situations, if any, does your child find challenging?

   _____

   _____

   _____

6. Is there a family background of learning differences (diagnosed/undiagnosed)? If so, please explain:

   _____

   _____

   _____

Disclosure Clause:
By signing this form, the parent(s) and/or guardian(s) certify that, at the time of application/admission, all information pertinent to a) the testing, screening and admission of a student to MIS have been disclosed. Failure to provide accurate translations, or to declare accurately and fully any assessments or evaluations made for educational support (e.g. special education or gifted programmes, individual educational plans, child guidance clinics, private tutoring, speech therapy, psychological assesment, etc.) and/or a student's psychological/medical background, **may result in the annulment of the application or the School's acceptance/offer**, or the student may be required to withdraw from MIS. Falsification of documents or omission of pertinent information will result in the (retroactive) annulment of the application or the School's acceptance offer; enrolled students would then be required to withdraw from MIS.

_____ _____

Name of Parent 1/Legal Guardian 1 (please print) **Signature of Parent 2/Legal Guardian 2**

_____

Date

This page is intentionally left blank for printing the Student Support Form on the previous page.

CONFIDENTIAL RECOMMENDATION FORM

Name of Applicant _____ Applying for Grade _____ Academic Year 20__/20__

The above student has applied for admission to Munich International School (MIS). MIS is an independent, coeducational day school offering a rigorous academic programme in a supportive and nurturing environment. Your candid assessment of this student's strengths and weaknesses is an essential part of the selection process and is greatly appreciated. The responses you give will remain strictly confidential.

To be completed by parents/guardians:

I herewith permit _____ (current pre-school/school) to provide MIS with a confidential recommendation for my son/daughter in support of my child's application to MIS. I understand that this recommendation is confidential between my child's current school and MIS and must be returned to MIS directly from
my child's current school.

_____
Signature of Parents/Legal Guardians

Academic Qualities	Weak	Fair	Good	Excellent (Top 10%)	No basis for judgement
Daily Attendance					
Motivation and Drive					
Originality and Creativity					
Critical and Abstract Thinking Skills					
Study Habits					
Attention Span					
Following Directions					
Organisation					
Classroom Conduct					
Class Participation					
Oral Communication					
Written Communication					
Ability to Work Independently					
Ability to Work with Others					
Completion of Homework					
Completion of long-term projects					
Ability to deal with anxiety and stress					
Academic Potential					
Academic Achievement					
Processing Information					
Working memory					

CONFIDENTIAL RECOMMENDATION FORM

Personal Qualities	Weak	Fair	Good	Excellent (Top 10%)	No basis for judgement
Personal Integrity					
Warmth of Personality					
Sense of Humour					
Self-Confidence					
Conduct					
Reaction to Criticism or Setbacks					
Effort					
Extra-curricular Participation (sports/arts/volunteer)					
Reaction to Change in Routines					
Concern for Others					
Sense of Responsibility					
Relationships with Adults					
Relationships with Peers					
Thinking before Acting					
Emotional Maturity					
Cooperation and Sharing					

How long have you known this student? _____

Please identify the three strongest qualities of this student: 1. _____ 2. _____ 3. _____

Please comment on the student's special interests, abilities, hobbies or talents.

_____

_____

What do you like best about this student? How has he or she made an impact on his or her class or on the school?

_____

_____

Has this student been recommended for/ received additional help or special education services at your school or with external support services? NO / YES - what services and for how long?

_____

_____

CONFIDENTIAL RECOMMENDATION FORM

Is there anything we should know about this student - personal circumstances, special factors, obstacles, fine motor and gross motor skills, speech and language, sensory, testing anxiety, social and emotional behaviour - that may play a part in his or her academic standing and social development?

Has the student been involved in disciplinary action at school? If so, please provide details eg. behavioural plan, in/out school suspension, probation, other.

Are/have there been any issues and/or concerns relating to the student's school attendance? If so, please provide details.

Has the student ever received an IEP, modified curriculum and/or accommodations for internal and/or external assessment? If so, please provide details.

Please comment on the quality of parental interaction with the school.

	not at all	with reservation	moderately	strongly
Academic potential	☐	☐	☐	☐
Character/ personal development	☐	☐	☐	☐
Overall recommendation	☐	☐	☐	☐

School _____

Name _____

Position _____

School Phone _____

School Email _____

Official School Stamp

Signature _____

Date _____

This form must be returned directly by fax, post or email by the person completing this form to:
Munich International School, Attn. Admissions Office, Fax: +49 (0)8151-366-129
Email: admissions@mis-munich.de. Address: Schloss Buchhof, 82319 Starnberg, Germany

This page is intentionally left blank for printing the Confidential Recommendation Form on the previous page.

STUDENT HEALTH FORM

STUDENT'S FAMILY NAME | FIRST NAME | DATE OF BIRTH | SEX | GRADE

NAME OF PARENT 1/LEGAL GUARDIAN 1 | NAME OF PARENT 2/LEGAL GUARDIAN 2

MEDICAL HISTORY/CONCERNS

The information is given voluntarily and underlies the physician's discretion.

Date of last physical examination: _____

Comments: _____

Please check & give appropriate date if child has had any of the below illnesses or suffer from the following medical conditions:

Dates of past illnesses	x	Date
Chicken Pox		
Whooping Cough		
German Measles (Rubella)		
7-day Measles (Rubeola)		
Mumps		
Rheumatic Fever		
Scarlet Fever		
Tuberculosis		
Pneumonia		
Poliomyelitis		
Frequent Colds		
Frequent Ear Infections		
Tonsilitis		
Other*		

*Additional Comments to the above:

_____

_____

_____

_____

Does the student suffer from any of the following?	x	Date
Diabetes		
Epilepsy		
Heart Trouble		
Fainting		
Asthma		
Hearing Difficulty		
Vision "		
Speech "		
Color Blindness		
Menstrual Pains		
Physical Impairments*		
Concentration Difficulty		
Operations*		
Serious Injuries		
Other*:		

*Additional Comments to the above:

_____

_____

Medical condition	Yes	No	Which:
Is the student now under medical care or taking medication?			
Is there any restriction on physical activity?			
Does the student have any allergies/food allergies?			

Please turn over and complete additional page.

STUDENT HEALTH FORM

IMMUNIZATIONS: Please fill in the chart and / or enclose immunization records.

Immunizations	Date	Date	Date
Smallpox			
Diphtheria			
Whooping C.			
Tetanus			
" Booster			
Measles			
Tick-Born-Encephalitis			

Immunizations	Date	Date	Date
Polio Injekt.			
Polio Oral			
Rubella			
Typhoid Fever			
Mumps			
BCG			

	Date	Result	
Eye Test			
Hearing Test			
TB Tine Test			Chest X-Ray:

This information is given voluntarily and underlies the physician's discretion. The given information will be stored and accessible electronically and will only be used by MIS to ensure the health and safety of your child. Personal data won't be shared with a third party.

With their signature, parents/legal guardians confirm that the above information is true and correct.

Date _____ Signature of Parents/Legal Guardians _____

PERMISSION TO RECEIVE NON-PRESCRIPTION MEDICINES

As children sometimes become ill at school with head-/tooth-/stomach aches, colds, hay fever, menstrual cramps, etc., we have a small supply of non-prescription medicines available to relieve annoying symptoms. Please check the appropriate box below and return signed.

NOTE: No aspirin preparations will be administered.

☐ I authorize the school nurse and designated staff to administer to my child non-prescription medicine as she deems appropriate

☐ I do NOT wish my child to receive any medicine at school

Date _____ Signature of Parents/Legal Guardians _____

CONFIRMATION OF PAYMENT OF SCHOOL, BUS AND OTHER FEES

(only to be completed in the case of payment or fees by a company or other third party)

Company/Third party name and address of the invoice recipient:

_____

Additional information on the invoices:

_____

Contact person (name, tel. and/or e-mail):

_____

Invoices will ONLY be sent by email.

Please send the invoices to the following email address (one only please):

Email address: _____

The above mentioned invoice recipient herewith guarantees to pay (please tick relevant boxes below):

- ☐ Tuition or Early Childhood Fees
- ☐ Technology Fees
- ☐ Application, Entrance, Registration and/or Re-registration Fees
- ☐ All Bus Fees
- ☐ All After School Activity / After School Care, Athletic Fees

associated with the attendance of Munich International School

Comment: _____
for the child(ren)/student(s):

Surname and first name of the parent(s)/guardian(s)	Surname and first name of child(ren)/student(s)

Parents/Guardians and the above mentioned invoice recipient shall be jointly and severally liable for the payment of the fees.

_____ _____

Place, date **Signature Stamp of invoice receipient**

_____ _____

Place, date **Signature of Parents/Legal Guardians/Students over 18**

MIS · Munich International School e.V. · Schloss Buchhof · D-82319 Starnberg · Germany
Phone: +49-8151-366-120/121 · Fax: +49-8151-366-129 · Email: admissions@mis-munich.de · www.mis-munich.de
Kreissparkasse München Starnberg Ebersberg · IBAN DE42 7025 0150 0022 8272 73 · BIC BYLADEM1KMS

This page is intentionally left blank for printing the Confirmation of Payment of School, Bus and other Fees on the previous page.

EARLY CHILDHOOD BOOKING FORM

The Munich International School Early Childhood Programme continues to pursue the educational objectives of the International Baccalaureate Primary Years Programme. Munich International School also implements the Bavarian Early Childhood education programme and have received recognition as an approved Kindergarten through the state of Bavaria. This approval brings many benefits in the form of professional development for our teachers, assistants and administrators, educational materials to monitor and support language and learning development of the children as well as financial support to supplement tuition fees.

This approval also extends to options for the length of day for Early Childhood students. To ensure students fully benefit from the range of curricula and learning opportunities that occur throughout the day, parents are strongly encouraged to enrol their children in the regular day booking option, with a pick up time at 15:20.

While all parents of Early Childhood children will not be asked to formally commit to a particular length of Early Childhood day until after an offer has been made by the School (i.e. this form is NOT a binding contract), we nevertheless ask at time of application for an indication of your preference in order to assist with staff and other planning.

Name of the child _____ for grade level: _____(i.e. EC 45 or EC 56)

Please fill in selected booking times. **Please also choose ONE option eg. 'Morning' option OR 'Full day' option OR 'Extended day' option.**

	Programme starts at	Programme ends at		
	Starting Time	**Morning option (4 hours)**	**Full day option (6 hours)**	**Extended day option (7 hours*)**
Monday	9:20	☐ 13:20	☐ 15:20	☐ 16:20
Tuesday	9:20	☐ 13:20	☐ 15:20	☐ 16:20
Wednesday	9:20	☐ 13:20	☐ 15:20	☐ 16:20
Thursday	9:20	☐ 13:20	☐ 15:20	☐ 16:20
Friday	9:20	☐ 13:20	☐ 15:20	N/A

***Please note that students enrolled in the Extended day option cannot participate in the After-School Activities programme.**
Please note also that the Extended day option is not available on Friday

Date _____

_____
Signature of Parent 1/Legal Guardian 1

_____
Signature of Parent 2/Legal Guardian 2

This page is intentionally left blank for printing the Early Childhood Booking Form on the previous page.

GRADE 9 COURSE SELECTION

Guidelines for course selection procedure (page 1/2).

Student name _____ **Grade** _____

Guidelines for students:

1. Discuss with your parents, as well as Admissions staff the courses available to you and the options you have.
2. Consider requirements and restrictions for the country in which you may choose to study after MIS.
3. Subject choices are made and entered on the form, parental approval is given and the form is submitted as part of your application.
4. The proposed subject choices are reviewed by the Grade 9/10 Counselor and Assistant Principal and a phone call, Skype or other meeting may be scheduled in due course.

*Please note that the School may not run courses with low numbers. If this is the case you will be asked to choose an alternative option.

Parental Approval

I approve of the courses my child has selected on this form.

_____

Signature

Any questions or concerns?

_____

_____

_____

_____

_____

_____

_____

_____

_____

For School use only

School's Approval

GUIDANCE COUNSELOR _____

Signature Date

ASSISTANT PRINCIPAL _____

Signature Date

GRADE 9 COURSE SELECTION

Guidelines for course selection procedure (page 2/2).

Student name _____ **Grade** _____ **Nationality** _____

Grade 9 at Munich International School is a continuation of the MYP programme delivered in Grades 5-8.

Following the MYP model means that many of the subjects are compulsory for all students.

For students who will be moving from Grade 8 at MIS into Grade 9 and for students who will be joining MIS in Grade 9, the following apply:

1. Students will be placed in heterogeneous groups by the School in these subjects: Integrated Science, Design, Physical Education, YA (Home Room) and Ethics
2. Students will be appropriately placed by the School, based on departmental recommendations and student achievement, in these subjects:
   - English
   - German
   - Mathematics
3. Students are **required to select 1 Arts subject ('Arts Choice'):** Art, Music or Drama
4. Students are **required to select 1 Individuals & Societies subject ('Individual & Societies Choice')**: History, Geography or Integrated Humanities
5. Students are **required to select 2 electives ('Elective Choice') from the following list of options**:
   - Integrated Science Extension
   - Georgraphy or History (if not choosing Integrated Humanities)
   - French B Beginners
   - French B Standard
   - Spanish B Beginners
   - Spanish B Standard
   - Unsere Welt in Unserer Zeit (taught in German)
   - Mandarin B Standard
   - Mother Tongue Language
   - Coding & Computing
   - Art
   - Music
   - Drama
   - Directed Study or Academic Support

For details of each of these courses please see the Grade 9/10 Curriculum document.

Arts Choice	Individuals & Societies Choice	Elective 1 Choice	Elective 2 Choice

GRADE 10 COURSE SELECTION

Guidelines for course selection procedure (page 1/2).

Student name _____ **Grade** _____

Guidelines for students:

1. Discuss with your parents, as well as Admissions staff the courses available to you and the options you have.
2. Consider requirements and restrictions for the country in which you may choose to study after MIS.
3. Subject choices are made and entered on the form, parental approval is given and the form is submitted as part of your application.
4. The proposed subject choices are reviewed by the Grade 9/10 Counselor and Assistant Principal and a phone call, Skype or other meeting may be scheduled in due course.

*Please note that the School may not run courses with low numbers. If this is the case you will be asked to choose an alternative option.

Parental Approval

I approve of the courses my child has selected on this form.

_____

Signature

Any questions or concerns?

_____

_____

_____

_____

_____

_____

_____

_____

_____

For School use only

School's Approval

GUIDANCE COUNSELOR _____

Signature Date

ASSISTANT PRINCIPAL _____

Signature Date

GRADE 10 COURSE SELECTION

Guidelines for course selection procedure (page 2/2).

Student name _____ **Grade** _____ **Nationality** _____

Grade 10 at Munich International School is a continuation of the MYP programme delivered in Grades 5-9.

Following the MYP model means that many of the subjects are compulsory for all students.

For students who will be moving from Grade 9 at MIS into Grade 10 and for students who will be joining MIS in Grade 10, the following apply:

1. Students will be placed in heterogeneous groups by the School in these subjects: Integrated Science, Design, Physical Education, YA (Home Room) and Ethics
2. Students will be appropriately placed by the School, based on departmental recommendations and student achievement, in these subjects:
   - English
   - German
   - Mathematics
3. Students are **required to select 1 Arts subject ('Arts Choice'):** Art, Music or Drama
4. Students are **required to select 1 Individuals & Societies subject ('Individual & Societies Choice')**: History, Geography or Integrated Humanities
5. Students are **required to select 2 electives ('Elective Choice') from the following list of options**:
   - Integrated Science Extension
   - Georgraphy or History (if not choosing Integrated Humanities)
   - French B Standard
   - Spanish B Standard
   - Unsere Welt in Unserer Zeit (taught in German)
   - Mother Tongue Language
   - Coding & Computing
   - Art
   - Music
   - Drama
   - Directed Study or Academic Support

For details of each of these courses please see the Grade 9/10 Curriculum document.

Arts Choice	Individuals & Societies Choice	Elective 1 Choice	Elective 2 Choice

GRADE 11/12 COURSE SELECTION

Guidelines for course selection procedure (page 1/2).

Student name _____ **Grade** _____

All the courses that may be offered are listed on this form. If you do the full IB Diploma Program, you will choose **three Higher Level** courses and **three Standard Level** courses. You should also choose two alternative courses just in case we are unable to give you your first choices. Please be aware that these are your course REQUESTS. Courses are chosen for two years.

Guidelines for students:

1. Please read the Grade 11/12 curriculum document.
2. Discuss with your parents and Admissions staff the courses you might take.
3. Select one course from each column in the table **overleaf** and write the name and level in the choice boxes. Select alternative courses from groups 3, 4 and 6 and write the name and level in the boxes *'Alternative choices'* boxes below each column.
4. Indicate as many university/college systems as may apply to you.
5. When you have made your selection, please ask your parents to confirm your selection with a signature.
6. Subject choices will be reviewed in a meeting with a Guidance Counselor in due course and the appropriateness of selections decided upon with reference to future options and university plans.
7. The Assistant Principal will ensure that course selections can be timetabled.

Parental Approval of Course Selection

Please choose one of the following:

_____ My child will take the MIS Diploma and the IB Diploma
_____ My child will take the MIS Diploma and some IB Certificates
_____ My child will take the MIS Diploma

University/College Options
Please indicate which university/college system(s) you may consider applying to:

- ☐ Germany ((this has specific course choice requirements, please check the course description booklet)
- ☐ United Kingdom
- ☐ United States/Canada
- ☐ Other (please state) _____

Please write your name, sign and date the form in the space below.

_____

_____
PARENT(S)/LEGAL GUARDIAN(S) NAME(S)

_____
SIGNATURE(S)

_____
DATE

For School use only

School's Approval

GUIDANCE COUNSELOR _____
Signature Date

ASSISTANT PRINCIPAL _____
Signature Date

GRADE 11/12 COURSE SELECTION

Guidelines for course selection procedure (page 2/2).

Student name _____ **Grade** _____ **Nationality** _____

Languages (Groups 1 + 2) English	Languages (Groups 1 + 2) German	Group 3 Individuals and Societies	Group 4 Sciences	Group 5 Mathematics	Group 6 The Arts & Electives
A Literature HL	A Literature HL	Business & Management HL	Biology HL	Math Analysis & Approaches HL	Film HL
A Literature SL	A Literature SL	Business & Management SL	Biology SL	Math Analysis & Approaches SL	Film SL
A Language and Literature HL	A Language and Literature HL	Economics HL	Chemistry HL	Math Applications & Interpretation HL	Music HL
A Language and Literature SL	A Language and Literature SL	Economics SL	Chemistry SL	Math Applications & Interpretation SL	Music SL
	German B HL	Geography HL	Physics HL		Theatre HL
English B HL	German B SL	Geography SL	Physics SL		Theatre SL
English B SL	German ab Initio SL	History HL	Design Technology HL		Visual Arts HL
		History SL	Design Technology SL		Visual Arts SL
	Other Languages	Psychology SL (online course)	Computer Science HL		**or a second subject from Columns 2, 3, or 4**
	Mother Tongue HL	Environmental Systems and Societies SL	Computer Science SL		
	Mother Tongue SL		Environmental Systems and Societies SL		
	French B HL				
	French B SL				
	Spanish B HL				
	Spanish B SL				
	Spanish ab Initio SL (online course)				

Column 1 Selection	Column 2 Selection	Column 3 Selection	Column 4 Selection	Column 5 Selection	Column 6 Selection
	Alternative Choices				

For School use only

Comments: _____

- ☐ Course Selection is recommended.
- ☐ Full Course Selection is not recommended.
- ☐ Not recommended for the IB Diploma

STATISTICAL SURVEY FOR GRADES 10 TO 12

In compliance with Tax Decree S0171 – 116 St423 dated 28 October 1998 in support of the non profit status of International Schools, the following information is required:

1. **Number of dependent family members**:

   ☐ 2 Pers. ☐ 3 Pers. ☐ 4 Pers. ☐ 5 Pers. ☐ 6 Pers. ☐ 7 Pers. ☐ 8 Pers. or more

2. **Ages of Children**:

   _____ Child _____Child _____ Child _____ Child

3. **Single Parent**:

   ☐ Yes ☐ No

4. **Is your monthly family disposable income from all sources**:

☐	**less than € 4600 – if so, please state the sum:** €_____
☐	**between € 4600 - € 5400**
☐	**more than € 5400**

5. **Is your employer paying the School Fees?**

   ☐ Yes ☐ No

This information in no way influences admission decisions made by the Munich International School and will be treated with strictest confidence.

_____ _____

Date **Signature of Parent(s)/Guardian(s)**

_____

Please print your name

This page is intentionally left blank for printing the Statistical Survey For Grades 10 to 12 on the previous page.

SENIOR SCHOOL CONSENT FOR SCHOOL DOCUMENTS GRADES 11 & 12

Dear Parent(s) or Guardian(s),

German law requires that both parents or guardians sign school documents when information and decisions therein might majorly impact the educational future of the student.

An example of this would be the course selection for the IBDP in Grades 11 and 12, where course selection will impact university application options after MIS.

In order to make this process as easy as possible we ask that you fill out this form and return it to the Admissions Office. You are welcome to re-submit this form at any time should relationship status change.

Please check one box and sign where appropriate.

☐ Option 1:

We the undersigned agree that a single signature from either of us will suffice on all school related forms.

Name of Parent 1 | Name of Parent 2

Signature of Parent 1 | Signature of Parent 2

☐ Option 2:

As one parent is deceased or as I have sole custody of my child my signature alone must suffice on all school related forms.

Name of Parent

Signature of Parent

☐ Option 3:

We the undersigned require both of our signatures on all forms pertaining to decisions that may majorly impact the educational future of my child.

Name of Parent 1 | Name of Parent 2

Signature of Parent 1 | Signature of Parent 2

This page is intentionally left blank for printing the Senior School Consent For School Documents Grades 11 & 12 on the previous page.

SCHOOL CALENDAR 2018-2019

2018 August			
20	Monday	**Beginning of School Year**	Classes Begin
2018 October			
01 - 02	Monday - Tuesday	Bridge Days	No Classes
03	Wednesday	Unification Day	School Closed
19	Friday		Last Day of Classes
20 - 28	Saturday - Sunday	**FALL BREAK**	No Classes
29	Monday		Classes Resume
2018 November			
01	Thursday	All Saints Day	School Closed
21	Wednesday	Staff Prof. Development	Classes end 12:00
2018 December			
21	Friday	Last Day of Classes	Classes end 12:00
22 - 6 Jan	Saturday - Sunday	**WINTER BREAK**	No Classes
2019 January			
07	Monday		Classes Resume
28	Monday	Staff Prof. Development Day	No Classes
2019 February			
22	Friday		Last Day of Classes
23 - 03 Mar	Saturday - Sunday	**SKI WEEK**	No Classes
2019 March			
04	Monday		Classes Resume
22	Friday	Staff Prof. Development Day	Classes end 12:00
2019 April			
12	Friday		Last Day of Classes
13 - 28	Saturday - Sunday	**SPRING BREAK**	No Classes
29	Monday		Classes Resume
2019 May			
01	Wednesday	May Day	School Closed
30	Thursday	Ascension Day	School Closed
31	Friday	Bridge Day	No Classes
2019 June			
10	Monday	Pentecost Monday	School Closed
20	Thursday	Corpus Christi	School Closed
28	Friday	Last Day of Classes **End of School Year**	Classes end 12:00
29	Saturday	**SUMMER BREAK**	No Classes

SCHOOL CALENDAR 2019-2020

2019 August			
20	Tuesday	**Beginning of School Year**	Classes Begin
2019 October			
03	Thursday	Unification Day	School Closed
04	Friday	Bridge Day	No Classes
18	Friday		Last day of Classes
19 - 27	Saturday-Sunday	**FALL BREAK**	No Classes
28	Monday		Classes Resume
2019 November			
01	Friday	All Saints Day	School Closed
20	Wednesday	Staff Prof. Development	No Classes
2019 December			
20	Friday	Last Day of Classes	Classes end 12:00
21 Dec - 6 Jan	Saturday-Monday	**WINTER BREAK**	No Classes
2020 January			
07	Tuesday		Classes Resume
2020 February			
14	Friday		Last day of Classes
15 - 23	Saturday - Sunday	**SKI WEEK**	No classes
24	Monday		Classes Resume
2020 March			
27	Friday	Staff Prof. Development	Classes end 12:00
2020 April			
03	Friday		Last day of Classes
04 - 19	Saturday - Sunday	**SPRING BREAK**	No Classes
20	Monday		Classes Resume
2020 May			
01	Friday	May Day	School Closed
21	Thursday	Ascension Day	School Closed
22	Friday	Bridge Day	No Classes
2020 June			
01	Monday	Pentecost Monday	School Closed
11	Thursday	Corpus Christi	School Closed
12	Friday	Bridge Day	No Classes
26	Friday	**Last day of Classes**	Classes end 12:00
27	Saturday	**SUMMER BREAK**	No Classes

MUNICH INTERNATIONAL SCHOOL
5 YEARS

How do I become a part of the
Munich International School Community?

Student Admissions:
admissions@mis-munich.de

Employment Opportunities:
employment@mis-munich.de

www.mis-munich.de