

# QSI



# QSI INTERNATIONAL SCHOOL OF SHENYANG

## Student Application Form

Please type or print your answers in the spaces provided

*\*A non-refundable registration fee of \$300 is required for each new student*

### Student Information:

Last Name	First and Middle Name	Nationality/Citizenship	Types of Application
			New Student
			Returning Student
Date of Birth (dd/mm/yyyy)	Expected Date of Entry (dd/mm/yyyy)	Grade Last Completed (Age Group)	Gender
			Male
			Female

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### Father's Information:

Father's Name/Guardian	E-mail	
Mobile/Home Phone	Occupation	Employer/Company
Work Address	Work Phone	WeChat

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### Mother's Information:

Mother's Name/Guardian	E-mail	
Mobile/Home Phone	Occupation	Employer/Company
Work Address	Work Phone	WeChat

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Local Mailing Address

Organization responsible for fees: (company, government, personal, etc.)

**School History:** List schools previously attended: *(start with the most recent at the top)*

Grade	Name of School	Location (Full address)	Dates Attended

\*May we contact the former school for records?

YES

NO

Please initial here: \_\_\_\_\_

\*Has student required any Special Education or have they had an IEP?

YES

If YES, please provide the details

NO

**Language Information:**

Primary Language                      Secondary Language                      Language Spoken at Home                      Language spoken at previous school

Level of English Proficiency:                      Beginner                      Intermediate                      Advanced                      Native

Language Other Than English (LOE): All 6 year-olds and above will take one chosen language.  
Children placed in Intensive English (IE) will NOT be enrolled in a LOE.  
Please tell us which LOE your child would like to study.

Chinese

French

German

**Bus Registration:** \*Mark the appropriate box:

Our child(ren) will NOT ride the school bus

Our child(ren) will RIDE the school bus

**\*Permission for Information Release:**

May we place your home phone numbers in our phone directory distributed to parents?                      Yes                      No

May we place your mobile phone numbers in our phone directory distributed to parents?                      Yes                      No

May we place your e-mail address in our phone directory distributed to parents?                      Yes                      No

May we use photos of your child in school publicatons, such as Yearbook, or on school website?                      Yes                      No

May we use photos of your child on our Facebook page?                      Yes                      No

(\*Please note that we do not tag or list names when posting)

**How did you hear about us?**

Family

Former Student

Friend/Colleague

Facebook

Google/Internet Search

WeChat

Word of Mouth

QSI Adverts : \_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Date



## BUS REGISTRATION FORM

QSI International School of Shenyang

School Year 2021- 2022

Name of Parent/Guardian: \_\_\_\_\_

(Mark the appropriate box)

- Our child(ren) will not ride the school bus.
- Our child(ren) as follows will ride the school bus:

1. Name: _____	Age: _____
2. Name: _____	Age: _____
3. Name: _____	Age: _____
4. Name: _____	Age: _____
5. Name: _____	Age: _____

PICK UP LOCATION	DROP OFF LOCATION
Address: _____ _____ _____ _____ _____ _____	Address: (Indicate same / different as pick up location) _____ _____ _____ _____ _____ _____

*(If necessary, please draw a map on the reverse side. Please include street names.)*

Transportation fees will apply to each student who takes the school bus. Transportation fees will be announced in the *Annual School Information Handbook*.

QSI does not provide a door-to-door bus service. Student(s) may be expected to come to a designated common pick-up area or bus stop. Parents will be responsible for supervision to and from the designated pick-up and drop-off area.

Student(s) riding the school bus are expected to follow safety rules for riding on the school bus and while waiting at the bus stop as outlined in the *QSI Standards of Behavior* policy.

Date (DD/MM/Year)	Parent / Guardian Signature



## EMERGENCY INSTRUCTION FORM

### QSI International School of Shenyang

In the event a student is injured or for any other reason needs emergency attention, the following information is required:

	Student Name	Date of Birth (DD/MM/Year)
1.		
2.		
3.		
4.		

If an emergency, illness, or injury should occur at a school-related function, please give the names of persons to be contacted: (Put an asterisk \* next to preferred contact method)

	Name of Emergency Contact	Relationship to Child	Mobile Number	Work / Home Phone Number
1.				
2.				
3.				

If emergency medical care is required, do you authorize school authorities to initiate medical care?  
 Yes /  No

If you have a preference for a doctor or hospital, please indicate below:

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Does your child(ren) have any medical conditions/allergies that emergency personnel should be aware of?  Yes /  No (If Yes, please provide further details below)

	Student Name	Known Medical Condition(s) / Allergies
1.		
2.		
3.		
4.		

In an emergency, I authorize school authorities to take any steps necessary to administer medical treatment to my child(ren) in the event one of my child(ren)'s parents/guardians are not available at the time.  Yes /  No

Date (DD/MM/Year)	Parent / Guardian Signature