



Reference number (filled in by the school)

Applying for Academic Year

Year Group

Previously applied to Shrewsbury International School Hong Kong?  Y  N (Tick ✓)



**PHOTO  
(45mm x 35mm)**

(1)

**A. Information about the child**

**i) Basic information**

Surname

Date of birth

First name

Gender

Middle name

Preferred name

(2)

**ii) Residence status / passport**

HKPR     HKPR with Foreign passport     Non-HKPR     Dependant visa     Visa pending

Expiry date: \_\_\_\_\_ Details: \_\_\_\_\_

HK ID number (if applicable) *X123456(A)*

**Child's Passport 1**

**Child's Passport 2 (dual nationality)**

Passport Country

Passport No.

Passport expiry date

(3)

**iii) Details of previous schools attended**

	1	2	3
Name of School	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country	<input type="text"/>	<input type="text"/>	<input type="text"/>
From month/year	<input type="text" value="/"/>	<input type="text" value="/"/>	<input type="text" value="/"/>
To month/year	<input type="text" value="/"/>	<input type="text" value="/"/>	<input type="text" value="/"/>
Year/grade level	<input type="text"/>	<input type="text"/>	<input type="text"/>
Main language of instruction	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contact person	<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email address	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contact number	<input type="text"/>	<input type="text"/>	<input type="text"/>

**iv) Language information**

First language

Second language

Additional language

**v) More about your child**

Does your child have any issues related to:

1. Physical disabilities (such as visual/hearing/speech/mobility)  Y  N
2. Behaviour (such as eating/sleeping disorders/anxiety/depression)  Y  N
3. Learning difficulties (please see guidance notes)  Y  N
4. Has your child ever been seen/evaluated by an Educational Psychologist/Counsellor/Speech Therapist/other specialist?  Y  N
5. Does your child have any other medical conditions or requirements? such as allergies, dietary, regular medication, conditions affecting performance or participation in class, Physical Education and swimming  Y  N
6. Does your child have any exceptional talent, special skills or interests?  Y  N

Where the answer is "YES" please provide details below

**B. Information about the child's siblings**

	First	Second	Third
First name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Middle name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	DD / MM / YYYY	DD / MM / YYYY	DD / MM / YYYY
Current school	<input type="text"/>	<input type="text"/>	<input type="text"/>
Applied to Shrewsbury	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N

**C. Parents/guardian information**

**i) Personal information**

Relationship	<input type="text"/>	<input type="text"/>
Title	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
First Name	<input type="text"/>	<input type="text"/>
Middle Name	<input type="text"/>	<input type="text"/>
Main Contact Person (Please tick ✓)	<input type="checkbox"/>	<input type="checkbox"/>

**ii) Contact details**

Postal Address	<input type="text"/>	<input type="text"/>
Marital Status	<input type="text"/>	<input type="text"/>
Contact Number 1	<input type="text"/>	<input type="text"/>
Contact Number 2	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>	<input type="text"/>
Company	<input type="text"/>	<input type="text"/>
Position/title	<input type="text"/>	<input type="text"/>
Type of business	<input type="text"/>	<input type="text"/>

**iii) Residence status / passport**

Passport Country	<input type="text"/>	<input type="text"/>
Passport Number	<input type="text"/>	<input type="text"/>
Additional Passport Country	<input type="text"/>	<input type="text"/>
Additional Passport Number	<input type="text"/>	<input type="text"/>
HK ID number (if applicable)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Type of Visa	<input type="checkbox"/> HKPR <input type="checkbox"/> Non-HKPR <input type="checkbox"/> HKPR with Foreign passport <input type="checkbox"/> Dependent visa Expiry date: _____ <input type="checkbox"/> Work visa Expiry date: _____ <input type="checkbox"/> Visa pending Details: _____ _____ _____	<input type="checkbox"/> HKPR <input type="checkbox"/> Non-HKPR <input type="checkbox"/> HKPR with Foreign passport <input type="checkbox"/> Dependent visa Expiry date: _____ <input type="checkbox"/> Work visa Expiry date: _____ <input type="checkbox"/> Visa pending Details: _____ _____ _____

**D. Capital Levy / Capital Certificate preference**

Capital Levy
  Standard Certificate
  Premium Certificate

**E. Billing Information**

Name of person/Company responsible for fees

Billing address

Billing email

Contact number 1

Contact number 2

(7)

(8)

**F. Declaration**

I/We are the legal custodian(s) of the child.

I/We give permission to Shrewsbury International School Hong Kong to obtain records and contact my child's previous school(s) for information in connection with this application.

I/We agree to be bound by Shrewsbury's admissions process, policy and declare that the information provided on this application form, together with any supporting reports and information is accurate and complete.

I/We agree to inform the school of any material change to the information provided on this application form.

I/We agree to pay the non-refundable Application Fee for this application.

I/We agree to pay the Capital Certificate upon submission of this Application Form.

I/We understand that completion of this application form does not guarantee an offer of a place at the school.

I/We agree to receive information relating to the promotion of the School's education, training programmes, activities and related services.

(9)

(10)

	Mother	Father	Guardian (if applicable)
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date	<input type="text"/>	<input type="text"/>	<input type="text"/>

**G. Additional Information**

Are you or anyone in your family an alumni of Shrewsbury School UK or Shrewsbury International School Bangkok? \_\_\_\_\_

Where did you hear about Shrewsbury International School Hong Kong?

- Employer                       Friends / Relatives                       Internet                       Kindergarten  
 Relocation Consultant                       Social Media

**Application Checklist**

Scanned

Please send the following scanned documents to admissions@shrewsbury.hk

1. A recent passport photo of the child (within the last 3 months)
2. Photocopy of child's:
  - Passport page showing the photo, name, date of birth, nationality and validity date
  - Valid HK visa
  - HKID card (if applicable)
  - Birth Certificate
  - School reports for the past two years (we recognize that it may not be possible to provide this for the youngest applicants)
  - Vaccination record
3. Photocopy of parents':
  - Passport page showing the photo, name, date of birth, nationality and validity date
  - Valid HK visa (if parents are not HK Permanent Residents)
  - If valid visas are not available, the reasons should be stated in the application form.
  - HKID card
4. Proof of payment of the application fee
5. Proof of payment of a Capital Certificate (if applicable)
6. Home Assessment Form

(10)