

APPLICATION FORM

ADMISSION GUIDE

1. Fill in the Application Form

The Application Form is available at the reception desk of RAINTREE INTERNATIONAL SCHOOL CAMBODIA or at its website: https://raintreeisc.com

2. Submit Application Form

Please submit the Application Form to reception desk at RAINTREE INTERNTIONAL SCHOOL CAMBODIA with the supporting documents including birth certificate, passport and most recent transcript.

The registration fee must be paid to further process the application form and secure the place. The fee will be refunded if the application is not successfully accepted by the school.

3. Placement Test

After the Application Form has been received, the enrollment office will review and contact parent/guardian for placement test.

The successful student will be contacted for next step.

4. Payment

After the student has been accepted by the school, parent will be advised about the payment process. All fees must be paid before the student attend the classroom.

APPLICATION FORM

STUDENT INFORMATION

| First Name | : | | | | |
|--|---|--|--|--|--|
| Middle Name | : | | | | |
| Last Name | : | | | | |
| Date of Birth | : | | | | |
| Gender | : □ Male □ Female | | | | |
| Nationality | : | | | | |
| Present School Na | 3: | | | | |
| Present Grade | : | | | | |
| Apply for | : | | | | |
| | rnational Program Nursery (Full Day) Kindergarten (Full Day) : Primary Grade (Half Day) : ional Program Primary Grade (Half Day) : | | | | |
| Bilir | ngual Program □ Primary Grade (Full Day) : | | | | |
| School Nam Grade School Year School Nam Grade School Year School Nam Grade School Year | ne : | | | | |
| | een suspended from school for any reason? ☐ Yes ☐ No f YES | | | | |
| Language Informat First Langua Second Lan Other Lang | age : | | | | |
| • | n Child have any health concern? Yes No ify if Yes | | | | |

| | • | our child take a | | | | |
|--|---|--|--------------|-----------|-----------------|--|
| | | attached medi | | | | |
| Emergency Hospital Contact Prefer Hospital/Clinic Hospital/Clinic Phone Hospital/Clinic Location Parent/Guardian Con | | | Number on | : : | | |
| ! | School Service | e (Please select School Bus Lunch Snack | the school s | ervice yo | u want to apply | y for) |
| 1 | Payment Met | hod (Please seld ☐ Term ☐ Semester ☐ Annually | ect the payn | nent meth | nod you prefer) | |
| PARENT | r/GUARDIEN | INFORMATION | | | | |
| | Father | | | | | |
| [(- | Name Nationality Occupation Telephone Address | : | | | | |
| | Mothe | er | | | | |
| (| Name Nationality Occupation Telephone Address | : | | | | |
| When o | our children s | uccessfully enr | roll in RAIN | TREE Inte | rnational Scho | y true and accurate. ol Cambodia, we as ad procedures of the |
| | Singed by Pare | ent/Guardian | : | | | |
| | Name | | | | | |
| Relationship with student | | : □ Fa | ither | ☐ Mother | ☐ Guardian | |
| 1 | Date | | : | | | |