



APPLICATION FOR ADMISSION 申请表格

Child's Particulars 孩子资料

Name 姓名: English 英文: _____ Chinese 中文: _____
MyKid No. _____ Sex 性别: _____ Race 种族: _____
Date of Birth 出生日期: _____ Place of Birth 出生地点: _____
Address 地址: _____
Telephone (Home/住家): _____ Fax: _____

Child's Family Details 家长记录

Father's Name 父亲姓名: _____ Mobile Phone No. : _____
IC No. 身份证号码: _____ Car Registration No.: _____
Occupation 职业: _____ Telephone No (O): _____
Email Address 电邮地址: _____
Employer's Name & Address 雇主名称和地址: _____

Child's Family Details 家长记录

Mother's Name 母亲姓名: _____ Mobile Phone No. : _____
IC No. 身份证号码: _____ Car Registration No.: _____
Occupation 职业: _____ Telephone No (O): _____
Email Address 电邮地址: _____
Employer's Name & Address 雇主名称和地址: _____

Siblings 兄弟姐妹

Name 姓名	Age 年龄	School 就读学校
_____	_____	_____
_____	_____	_____
_____	_____	_____

Emergency Contact 紧急联络人 (不包括父母) (Please provide the names of those who can be contacted if you cannot be reached)

Name 姓名	Relationship 关系	Telephone No 电话
_____	_____	_____
_____	_____	_____
_____	_____	_____

Tadika Sri Puncak 绿野幼儿园 (Montessori)

Lot 633, No.1A Jalan Senyum Matahari, Country Heights, 43000 Kajang, Selangor Darul Ehsan, Malaysia.

Tel: 03 – 8736 8277 HP: 012 – 223 6176

Website: <http://tsp.edu.my> Email: chkindi@gmail.com

Additional Information that will help us to know your child better

进一步的资料帮助我们更了解您的孩子

Language(s) spoken at home 在家使用的语言

Bahasa Melayu / 马来语 English/ 英语 Mandarin/ 华语 Tamil/ 淡米尔语

Dialect/ 方言

Please state/请注明: _____

Eating habits 饮食习惯:

Good 好

Average 中等

Poor 需要帮助

Toilet habits 如厕习惯:

Well Established 已调练好

Introductory Stage 介绍阶段

Terminology for Urination 排尿问题

Defection 排便问题

Child special interest (e.e. Aeroplane, computer, cars, singing etc)

孩子特别喜欢的活动或玩具 (如: 飞机、电脑、汽车、唱歌等)

Child fears (e.g. Darkness, thunder etc) 孩子害怕的东西 (如: 怕黑、打雷等)

Behavior pattern (e.g. Shy, active, approachable, friend etc) 行为习惯 (害臊、活跃、被动、友善等)

School registered for Std.1 一年级报了那一间学校? : _____

Previous child care/kindergarten (if any) 之前年过的幼儿园 (如有): _____

Medical/Health Record 医药健康记录

Special health problem 特别的健康问题: _____

Disabilities 残缺: _____

List of Allergies 药物敏感记录: _____

List of serious injuries/ accident prior to now 严重受伤: _____

Others 其他: _____

FOR OFFICE USE 行政用途

Officer: _____ Date: _____

Class 班级 _____

Date of Observation 观擦日期 _____

Date of Registration 注册日期 _____

Date of Entrance 入学日期 _____

Payment 学费 _____

Receipt 收据 _____

TSP Policy & Agreement

The Management of Tadika Sri Puncak
Lot 633, No. 1A Jalan Senyum Matahari,
Country Heights, 43000 Kajang,
Selangor Darul Ehsan.
Tel: 03 – 8736 8277

- 1) I, Mr./Mrs. _____ hereby acknowledge that I have read, understood and agree to be bound by the Terms and Conditions presented and agree to abide by the policies stipulated therein and others that will be made known to me from time to time.
- 2) I agree that all payments are non-refundable and non-transferable.
- 3) I agree to give at least on (1) month written notice should wish to withdraw my child from this school.
- 4) The One (1) month deposit will be used as fees for the final month upon the one (1) month withdrawal notice being given and all other outstanding fees having been settled.
- 5) I agree to attend 3 monthly sessions in an academic year on the Montessori topics presented by Tadika Sri Puncak.
- 6) I agree / disagree to have my child's / children's photos on the website.
- 7) In the event of an emergency, I authorize Tadika Sri Puncak to take whatever action deemed necessary. I hereby agree not to hold TSP liable for any injuries or accidents sustained on the premises of TSP or its surrounding premises.

Signature

Name of Parent

Date: _____

In the event that the duly signed acknowledgement slip below is not returned to the school within the stipulated time, the Terms and Conditions is still deemed valid and binding upon the parties hereto.

This letter is to be returned to the office within 14 days of receipt.