Offic	e Use		☐ Term 1	☐ Ter	m 2	□ Те	erm 3			a photograph plicant here.	
	Foreign Natio	onality	☐ Dual Nationality								
	Japanese Re	turnee	☐ Non-Returnee Japanese						Approx. 4 cm x 5 cm photograph taken		
M	AKUHA	RI IN	TERNATI	ONAL	SC	HOOL			within the	past 6 months.	
			FORM (F						,	te the name on	
							1 20)		lie	back.)	
MAK	CUHARI INTE	ERNATIO	NAL SCHOOL					ī			
			Last Name			First Name			Middle Name		
	Name in English										
S T	ふりがな						Da	ate of	f Birth	Gender	
U D	氏名					,		,	MALE		
E N T	(漢字) Name in Japanese							/	FEMALE		
							Year	Mor	nth Day	T LWIALL	
I N F O	Nationality	Visa Status (If Foreign National)									
	Does he/she have siblings at Makuhari International School?										
A T	If so, pleas	e write th	ne MIS student's name and class. (Class: Name: )								
O	1) Current Address 現住所 (If you live in Japan, please fill in Japanese if possible. 日本にお住いの場合は日本語でご記入ください。 (〒 )								ご記入ください。)		
N			,								
	TEL (home)					FAX					
	Name (in English)						Nationality	,			
PATHER RENT	ふりがな						rvacionancy				
	氏名 (漢字) Name in Japanese						Mobile Phor	ne			
	Email Address										
	Employer						Work Phon	е			
	Name (in English)						Nationality	,			
P M A O	ふりがな						-				
R T E H	氏名 (漢字) Name in Japanese						Mobile Phor	ne			
N E T R	Email Address							·			
	Employe	-					Work Phon	е			

		Current school he/she attends (											
STUDENT INFORMATION	SCHOOL HISTORY (日本の学校 の場合、日 本語で記入)	Language of Instruction ( ) Country ( )											
		Period Attended / / ~ /											
		Year Month Day Year Month Day											
		Previous school he/she attended (											
		Language of Instruction ( ) Country (											
		Period Attended / / ~ /											
		Year Month Day Year Month Day Is English used at home?											
	ENGLISH ABILITY EXPERIENCE LIVING ABROAD												
		How long has your child been speaking English?											
		Country Stayed (											
		Period Stayed / / ~ / / / / / / / / / / / / / / / /											
		Country Stayed (											
		· / / ~ / · /											
		Period Stayed Year Month Day Year Month Day											
	Does your child have any												
	food allergy?												
	If YES, please explain												
	in det												
		<u> </u>											
	se explain how out about the												
		_											
BEL		NTS - ANY ADDITIONAL INFORMATION YOU WOULD LIKE TO ADD? PLEASE WRITE											
<b>,</b> .	1 ,1 ,												
		ne details mentioned above are true and complete. I agree to follow the Makuhari shool Home School Agreement as well as the Parent Handbook and MIS  Parent/Guardiar											
		ement Expectations.											
	Signed	Date											

All information disclosed in this form will be treated as confidential by the school and not shared with any third parties, nor used for any other purposes.