

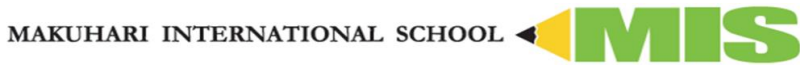
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Please glue a photograph of the applicant here.

Approx. 4 cm x 5 cm photograph taken within the past 6 months.

(Please write the name on the back.)

# MAKUHARI INTERNATIONAL SCHOOL APPLICATION FORM



STUDENT INFORMATION	Name in English		Last Name	First Name	Middle Name
	ふりがな		Date of Birth		Gender
	氏名 (漢字) Name in Japanese		/ / Year Month Day		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
	Application to Grade		<input type="checkbox"/> Kindergarten <input type="checkbox"/> Elementary	Preferred Enrollment Date	/ / Year Month Day
	Nationality		Application Criteria (Please Check)		<input type="checkbox"/> Criteria 1 (Foreign Nationality) <input type="checkbox"/> Criteria 2 (Dual Nationality) <input type="checkbox"/> Criteria 3 (Japanese Returnee) <input type="checkbox"/> Criteria 4 (Non-Returnee Japanese)
	Does he/she have siblings at Makuhari International School? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please write the MIS student's name and class. (Class: _____ Name: _____)				
	Does he/she have siblings applying to Makuhari International School at the same time? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please write the child's name and grade. (Grade: _____ Name: _____)				
	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。) (〒 _____ )				
	2) Address after Enrollment 入学後住所 (Please fill in Japanese if possible. 可能な限り日本語でご記入ください。) (〒 _____ ) <input type="checkbox"/> Same as above 同上 <input type="checkbox"/> To be Determined 未定				
	TEL (home)			FAX	
(PARENT)	Name (in English)		Nationality		
	ふりがな				
	氏名 (漢字) Name in Japanese		Mobile Phone		
	Email Address				
	Employer			Work Phone	
(MOTHER)	Name (in English)		Nationality		
	ふりがな				
	氏名 (漢字) Name in Japanese		Mobile Phone		
	Email Address				
	Employer			Work Phone	

STUDENT INFORMATION	SCHOOL HISTORY (日本の学校の場合、日本語で記入)	Current school he/she attends ( )
		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 )
	ENGLISH ABILITY	Is English used at home? ( )
		Has your child studied in a full time international school before? ( )
		How long has your child been speaking English? ( )
		Has your child had instruction in English in addition to time spent in school? ( )
EXPERIENCE LIVING ABROAD	Country Stayed ( )	
	Period Stayed ( Year / Month / Day ~ Year / Month / Day )	
	Country Stayed ( )	
	Period Stayed ( Year / Month / Day ~ Year / Month / Day )	
Does your child have any special learning needs? If so, please provide information.		
How long do you plan to stay at Makuhari International School?		
If your child goes by another name (e.g., nickname), please let us know.		
(If you are living outside of Japan) Does your child also go to Japanese language supplementary school ((日本語)補習授業校)? <input type="checkbox"/> Yes ( ) / <input type="checkbox"/> No		
Please explain how you found out about the school.		
<b>QUESTIONS BELOW ARE FOR APPLICANTS TO KINDERGARTEN 1 ONLY</b>		
Can your child care for his/her bathroom needs?	<input type="checkbox"/> Yes / <input type="checkbox"/> No (Students may not use diapers at school.)	
Does your child take an afternoon nap?	<input type="checkbox"/> Yes / <input type="checkbox"/> No *If yes, how long? ( )	
What time does your child go to bed?		
How often do you read stories to your child?		
<b>FOR ALL PARENTS – ANY ADDITIONAL INFORMATION YOU WOULD LIKE TO ADD? PLEASE WRITE BELOW.</b>		
<b>I declare that the details mentioned above are true and complete. I agree to follow the Makuhari International School Home School Agreement as well as the Parent Handbook and MIS Parent/Guardian Positive Engagement Expectations.</b>		
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.