



The International School Of Lae

PO Box 2130 Lae Morobe Province

Phone: 479 1425 / 479 1422 Fax: 472 3485
Email : mail@tisol.iea.ac.pg

ENROLMENT APPLICATION – TISOL Program TISOL Plus Program

STUDENT DETAILS

Family Name: _____ Given Name: _____

Grade applied for: _____ Anticipated start date: _____

Date of Birth: _____ (day, month, year) Sex: Female Male

Nationality: _____ Language Spoken at Home: _____

Country of Birth: _____ Religion: _____

Residential Address: _____ Postal Address: _____

Home Phone: _____ Home Fax: _____

Home E-mail: _____ Other No.: _____

FAMILY DETAILS: Father/Guardian's Details

Title: _____ Family Name: _____ Given Name: _____

Occupation: _____ Employer: _____

Work Phone: _____ Work Fax: _____

Work E-mail: _____ Mobile: _____

FAMILY DETAILS: Mother/Guardian's Details

Title: _____ Family Name: _____ Given Name: _____

Occupation: _____ Employer: _____

Work Phone: _____ Work Fax: _____

Work E-mail: _____ Mobile: _____

Please send school newsletters or other information to the following email addresses:

Home Father Work Mother Work Other _____

Family Situation

This student lives with: Father Mother Other: _____

Other children in the family at this school:

Name: _____ Grade: _____ Date of Birth: _____ Sex F M

Name: _____ Grade: _____ Date of Birth: _____ Sex F M

Name: _____ Grade: _____ Date of Birth: _____ Sex F M

Emergency Contact Details

Name: _____

Address: _____

Day Phone: _____ Day Fax: _____

E-mail Address: _____ Mobile: _____

MEDICAL DETAILS

Preferred Doctor: _____ Location: _____

Work Phone: _____ Mobile Phone: _____

By signing this enrolment form, I accept that in the absence of the preferred doctor, the school will seek medical assistance from any other doctor in an emergency.

Medical problems that the school should be aware of: *(If none, write NONE.)*

NB. IEA schools do not provide comprehensive Personal Accident Insurance cover for students. In the case of significant medical costs, such as medi-vac, students need to be covered by insurance policies taken out by their family or company.

ACADEMIC HISTORY

Previous Schools (in reverse chronological order)

School: _____ Years at the school: _____ Grade: _____

School: _____ Years at the school: _____ Grade: _____

ENROLMENT DETAILS

Payment Details

Enrolment Status: Full Time Student Part Time Student – ECC only

Payment Rate: Annual Fees Term Payments

Fee to be paid by: Parents Employer _____

N.B Parents are responsible for the payment of fees irrespective of any arrangement with an employer, including the government.

Attachments

- 3 A passport sized photo (*New Student*)
 - 4 The latest available school report (*New Student*)
 - 5 A copy of Birth Certificate (*New PNG Student*)
 - 6 A photocopy of the front of passport and visa (*Non PNG*)
 - 7 *After School Travel Arrangements / Bus form if required*
- 1 Registration Fee K 150
- 2 Fees in Advance K _____
- Total Payment: K _____

Agreement

- I have read and understand the *Conditions Relating to School Charges* and the school *Code of Conduct*.
- I understand that this enrolment is valid for one academic year only and the school reserves the right to refuse re-enrolment next year if my child's attitude or behaviour is unsatisfactory during this year.
- I understand that TISOL reserves the right to allocate my child to the class and grade appropriate to their age and educational experience.
- I acknowledge that my child will be expected to participate in off-site excursions and/or activities from time to time.
- I consent to being a member of the TISOL School Association Inc.
- I/we are the legal parents/guardians of the child named herein and that we have the legal right to enroll them into school in Papua New Guinea.

Mother/Guardian's Signature: _____ Date: _____

Father/Guardian's Signature: _____ Date: _____

ACCEPTANCE OF ENROLMENT Office Use Only

Commencement Date: _____ Grade: _____

All documents received

All outstanding monies cleared from TISOL Other IEA Schools Enrolment Accepted

Payment Received: K _____ Date: _____ Date: _____