Willowbrook International School Application Form 2018-2019

"Planting the Seeds of Wisdom"

2-14-28 Motoazabu, Minato-ku, Tokyo, 106-0046 JAPAN Tel (03) 3449-9030 Fax(03)3449-9064 School Visit Date When do you wish your child to start? Month / Year Month / Date Name First Middle Last Preferred name for labels 漢字氏名 Japanese if available Date of Birth Sex M / F Nationality(ies) Please attach a copy of passport (photo page) Address in Japan (Please write it in Kanji if available) Postal code **Telephone** Parents' information Parent 1 Parent 2 Name 漢字 (Kanji if available) Relationship to child Nationality(ies) Language(s) Mobile phone E-mail Employer Position/title Business address (Kanji if available) Postal code Postal code Attn: Attn: Business phone Check here to have invoice sent directly to your company

In which program would you like to your child to be enrolled? Please check days. If you have a second choice, third choice, or more, please clarify.

for 2018-2019 school year (from August 2018 to June 2019)

Age Group	Program	Hours	Please check	Birthdays to apply 2018-2019
15mons-2.5 yrs	Regular	8:30-12:30 8:30-14:00	 ☐ 5 days ☐ 3 days ☐ 2 days ☐ 2 days ☐ 2 days 	1st Sep 2016 - 31st Aug 2017
2-3 years	Regular	8:30-12:30 8:30-14:00	□ 5 days □ 3 days □ 2 days □ 5 days □ 3 days □ 2 days	1st Sep 2015 - 31st Aug 2016
	Dual Immersion	8:30-12:30 8:30-14:00	□ 5 days □ 3 days □ 2 days □ 5 days □ 3 days □ 2 days	1st Sep 2015 - 31st Aug 2016
3-4 years	Regular	8:30-14:00	☐ 5 days ☐ 3 days ☐ 2 days	1st Sep 2014 - 31st Aug 2015
3-5 years	Dual Immersion	8:30-14:00	☐ 5 days	1st Sep 2013 - 31st Aug 2015
4-5 years	Regular	8:30-14:00	☐ 5 days ☐ 3 days	1st Sep 2013 - 31st Aug 2014

^{*} The class allocation for your child may change during the settling in period (between 1 week and 1 month) depending on your child's needs.

In order to best accommodate your child's needs, please complete the following questions as thoroughly as possible.

1. How did you find out about our school? Please give us the names and contact information (email or
phone number) of those who recommended Willowbrook. We may contact them if we need more
information regarding your application and it may affect the waiting list priority.

2. What were your reasons for choosing our school?

3a. What is the parents' English language level and background? (e.g. native or fluent in English, studied abroad, attended International school, etc.)

- 3b. What is the primary language your child speaks at home?
- 3c. What other languages are spoken at home?

4. Has your child previously attended playgroup or a lf so, please indicate the name of school and address		gress reports).			
5. What do you consider to be your child's strengths	?				
6. Does your child have any special dietary requirmed (i.e. food allergies, religious reasons, etc.). Please in your child requires medical treatment for any exposu decisions.	dicate the seriousness of t	he allergy and whether			
 7. Is your child toilet trained? Toilet training is required for 3-4 year olds, and 4-5 year olds. Yes / Not yet 8. Has your child received any developmental therapy or counseling? If so, please describe. 					
9. Is there anything else we need to know about your child?					
Siblings Names	Age	School Name			

Medical Authorization and other authorization

I understand that the school will make every effort to reach the parents or designated emergency contact in the event of an emergency. However, if the parents cannot be contacted, I authorize Willowbrook International School to take any emergency measures necessary. I agree to be responsible for any expenses incurred in such an event.

My child has all the appropriate immunizations, or will have by the beginning of the school term. I will provide documentation to the school upon enrollment.

Note: Please state any concerns/specific views regarding the above statement. We will collect further emergency contact information upon enrollment.

Tuition policy

1. Tuition fees will not be refunded under any circumstance.

Tuition may be paid in either one or two installments (Aug-Dec and Jan-Jun). No tuition refunds will be given due to the potential difficulty of enrolling another student to fill an open position once the session has begun.

2. Tuition must be paid by the payment deadline of each term as stated below for the 2018-2019 school year.

First session (September - December, 2018)

Second session (January - June, 2019)

Due date

May 23rd, 2018

November 26th, 2018

- 3. A one-time non-refundable Registration Fee is payable upon the child's entrance to the school.
- 4. A one-time non-refundable Application Fee is payable upon the child's application to the school.
- 5. Please have all payments made to the school's bank account. (Except Sora class)

Attached Document		
Have you attached copies of your child's passport		
Have you attached a family photo?		
(optional) Have you attached a recommendation l		
(if available) Have you attached any progress reposchool your child is attending?		
I / We have, or will arrange to have, the applicatio account.		
Agreement		
I / We waive the right to access the Confidential R		
I / We have read the Policy Booklet and Tuition Postated therein.		
I / We are not belonging to or are affiliated with ar		
Parent 1 signature		
Parent 2 signature		
Date		