	onal School Application Form 2019-2 eeds of Wisdom"	020
2-14-28 Motoazabu, Minato-ku, Tokyo,	106-0046 JAPAN Tel (03) 3449-9030	Fax(03)3449-9064

When do you wish y	our child to start?	Month	/ Year	School V	isit Date	Month / Date
Name	First		Middle		Last	
	Preferred name for	or labels	-	漢字氏名 Ja	panese if a	available
Date of Birth	Month	/ / / Date / Y	ear	-	Sex_	M / F
Nationality(ies)	Please attach a cop	by of passport	(photo page)			
Address in Japan						
(Please write it in Kanji if available)				-		
Telephone				Postal code		

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 ir	nvoice 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 2019-2020 school year (from August 2019 to June 2020)

101 2019 2020 School year (11011 August 2019 to build 2020)				
Program	Hours	Please check ⊡preferred days	Birthdays to	
		•	apply 2019-2020	
		<u> </u>		
Regular	8:30-12:30	🗌 5 days 🗌 3 days 🗌 2 days	1st Sep 2017 -	
	8:30-14:00	5 days 3 days 2 days	31st Aug 2018	
Regular	8:30-12:30	5 days 3 days 2 days	1st Sep 2016 -	
	8:30-14:00	🗌 5 days 🗌 3 days 🗌 2 days	31st Aug 2017	
Dual Immersion	8:30-12:30	🗌 5 days 🗌 3 days 🗌 2 days	1st Sep 2016 -	
	8:30-14:00	5 days 3 days 2 days	31st Aug 2017	
-4 years Regular 8	8:30-14:00	\Box 5 days \Box 3 days \Box 2 days	1st Sep 2015 -	
Regular			31st Aug 2016	
3-5 years Dual Immersion	9.20 14.00	□ 5 days	1st Sep 2014 -	
	0.50-14.00		31st Aug 2016	
Poqular	8:30-14:00		1st Sep 2014 -	
Regular			31st Aug 2015	
	Program Regular Regular	Program Hours Regular 8:30-12:30 Regular 8:30-12:30 Regular 8:30-12:30 Regular 8:30-12:30 Bigge 8:30-12:30 Bigge 8:30-14:00 Dual Immersion 8:30-14:00 Regular 8:30-14:00 Dual Immersion 8:30-14:00 Dual Immersion 8:30-14:00	ProgramHoursPlease check Øpreferred days 5 days -M/Tu/W/Th/F 3 days-M/W/F 2 days-Tu/ThRegular8:30-12:305 days3 days2 days8:30-12:305 days3 days2 days8:30-14:005 days3 days2 days8:30-14:005 days3 days2 days8:30-14:005 days3 days2 days8:30-14:005 days3 days2 daysRegular8:30-14:005 days3 days2 daysDual Immersion8:30-14:005 days3 days2 daysDual Immersion8:30-14:005 days3 days2 days	

* 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? (If Willowbrook was reccomended to you by somebody associated with the school, please ask that person to contact us at the time of your application via email, phone or letter)

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 another pre-school? If so, please indicate the name of school and address. (Please submit any progress reports).

5. What do you consider to be your child's strengths?

6. Does your child have any special dietary requirments, restrictions or health concerns? (i.e. food allergies, religious reasons, etc.). Please indicate the seriousness of the allergy and whether your child requires medical treatment for any exposure. Allergies are NOT a factor in admissions decisions.

- 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 2019-2020 school year.

Due date

	Due uale
First session (September - December, 2019)	May 22nd, 2019
Second session (January - June, 2020)	November 25th, 2019

- 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 letter?	
(if available) Have you attached any progress reports from the current or former school your child is attending?	
I / We have, or will arrange to have, the application fee transmitted to the school account.	
Agreement	
I / We waive the right to access the Confidential Recommendations to other schools.	
I / We have read the Policy Booklet and Tuition Policy and agree to the requirements stated therein.	
I / We are not belonging to or are affiliated with any Anti Social Forces.	

Parent 1 signature

Parent 2 signature

Date