



## SCHOLARSHIP PROGRAMME



### REGISTRATION FORM

Date Entry of the form: \_\_\_\_\_  
 (to be filled up by school officer)

No: \_\_\_\_\_

#### STUDENT INFORMATION

Student's Legal Name \_\_\_\_\_  
 (First Name) (Middle Name) (Last Name)

Place and Date of Birth \_\_\_\_\_

Sex  Male  Female Birth Order : 1<sup>st</sup> / 2<sup>nd</sup> / 3<sup>rd</sup> / ..... child

Religion \_\_\_\_\_

Current Address \_\_\_\_\_  
 (for correspondence purpose)

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Student is staying with  Father  Mother  Both Parents  
 Boarding  Other \_\_\_\_\_

First Language \_\_\_\_\_

Second Language 1. \_\_\_\_\_ 2. \_\_\_\_\_

Citizenship  Indonesian  Other \_\_\_\_\_

Is applying for (please tick)

a. Kindergarten  Nursery  KG 1  KG 2  KG 3

b. Primary  Grade 1  Grade 2  Grade 3  
 Grade 4  Grade 5  Grade 6

c. Lower Secondary  Grade 7  Grade 8  Grade 9

d. Higher Secondary  Grade 10  Grade 11  Grade 12

#### PREVIOUS SCHOOL INFORMATION

Previous School	Address (and phone number)	Year	Grade Level	Language of Instruction	Reasons for Moving

Has the student ever been asked to withdraw from the school?  Yes  No

If YES, please explain: \_\_\_\_\_

PARENTS AND/ OR GUARDIANS INFORMATION			
	Father	Mother	Guardian
Legal and Full Name			
Residential Address			
City			
Postal Code			
Cell Phone Number			
Telephone Number (Home)			
Fax Number (Home-if any)			
Email Address (Home)			
Office Address			
City			
Postal Code			
Telephone Number (office)			
Fax Number (Office)			
Email Address (Office)			
Job Title			

***For Indonesian Citizen Only***

ID No (KTP)			
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***For Foreign Citizen Only***

	Father	Mother	Student
Passport Number			
Passport Expiry Date			
KITAS Number			
KITAS Expiry Date			
Visa Number			
Visa Type			
Visa Expiry Date			

SIBLING INFORMATION					
No	Name	D.O.B	Sex	School Name	Remarks
			Male/ Female		
			Male/ Female		
			Male/ Female		
			Male/ Female		
			Male/ Female		

## AGREEMENT

I am the Parent / Guardian of a student enrolled at Central International School (CIS) or Global Sevilla International School (GSIS), I have read all information and policy of the school, therefore, I agree:

1. To follow School Policy and Procedure, including Protection against the Possession, Use and Trafficking of Prohibited Substances. I also hereby provide The School with the authority to obtain from the nominated clinic the results of any and all pathology and/or clinical tests which my child has participated in as part of an internal school investigation.
2. To understand concern raised during observation while the admission test was conducted and if on further observation the school seeks professional advice or intervention, I fully agree to cooperate with the school.
3. That photographs of my child taken during school years at CIS / GSIS may be used for School Year Book, School Magazine, School Prospectus, School Events covered in newspapers and magazines, Billboards and other publications.

I hereby declare my unconditional agreement with the said Policy.

Jakarta, \_\_\_\_\_  
*Date/Month/Year*

Signature of Parent/Guardian,

Signature of Student

*Materai Rp. 6.000,-*

\_\_\_\_\_  
Full name

\_\_\_\_\_  
Full name

## MEDICAL RECORD

STUDENT DATA		
<u>Name</u> (Nama)	:	_____
<u>Date of Birth</u> (Tanggal Lahir)	:	_____
<u>Grade</u> (Kelas)	:	_____
<u>Height/ Weight</u> (Tinggi/ Berat Badan)	:	_____ cm/ _____ kg
		Photo 3x4

<u>VACCINATION HISTORY (For Kindergarten Students Only)</u> <i>Sejarah Imunisasi (Untuk murid TK saja)</i>	
<u>Name of Vaccine</u> (Nama Vaksin)	<u>Age of Child</u> (Umur Anak)

Has your child ever been any of illness? (such as Asthma Bronchiole, TB, Epilepsy, Congenital Disorders, Hepatitis and others). \_\_\_\_\_

Is your child on any medications? \_\_\_\_\_

If so, please mention the name and the reason he/she is on medication. \_\_\_\_\_

Is your child has allergy to medication or others allergy? \_\_\_\_\_

If yes, please mention. \_\_\_\_\_

Is there anything else that you would like the school to know about your child? \_\_\_\_\_

That all information related to my child furnished are true and to the best of my knowledge.

Parents Signature: \_\_\_\_\_  
( )

## SCHOOL POLICY

### PARENTS – PLEASE READ CAREFULLY

#### SCHOOL FEE SCHEME AND PAYMENT

1. We understand and agree to comply the Development Fee and Tuition Fee according to the payment scheme as mentions in the confirmation letter and/or payment agreement letter.
2. We fully understand that students will be accepted to the school once we have fulfilled the Development Fee on the agreed due date of payment. If the payment is done after the agreed due date, it will follow the consecutive payment scheme.
3. The Development Fee is **non-refundable and non-transferable to other candidates, and cannot be claimed for any reasons (withdraws or is expelled from the school).**
4. All payments are considered valid if the original receipt has been exchanged with the school receipt.

*For further information, please contact our Marketing division at (021) 580 6699*

#### SCHOOL AS A PEACE ZONE

As a school community, we feel that through the following rights and rules, we can protect and nurture the students in our care. Parents, Teachers and Secondary Students are asked to sign a statement as a joint commitment to our school. Parents of students in KG and Primary are asked to sign on behalf of their children. Those who cannot uphold the values inherent in these rights and rules will be asked to withdraw from the School.

We believe that every child is born free and has the right to an excellent education.

**This School is a Peace Zone and we have no tolerance for:**

- Drugs
- Alcohol
- Smoking
- Verbal abuse
- Emotional abuse
- Physical abuse

We believe in reverence for human life and respect for each child's body and mind. Through discipline, responsibility and assertiveness, we will protect our School Community.

#### **SCHOOL POLICY REGARDING PROTECTION AGAINST THE POSSESSION, USE AND TRAFFICKING OF PROHIBITED SUBSTANCES (for Higher Secondary Students)**

This document describes the policy adopted by the Council of Central International School and Global Sevilla International School for protection from the consequences of possession, use, or trafficking of prohibited substances by students. The Policy is consistent with the law of Indonesia and consistent with similar policies adopted by other schools in Indonesia and overseas.

The school expects all students, parents and staff to be thoroughly familiar with this Policy and be aware of the serious long-term consequences that may result for any student being made the subject of any inquiry, and also for any student if they, member of their families or other persons hinder or obstruct or are suspected of hindering or obstructing an inquiry by the school into matters related to prohibited substances.

Before any student is admitted to Central International School and Global Sevilla International School Higher Secondary Programme (Grades 10, 11 and 12), a parent or guardian must provide proof of their unconditional agreement with this Policy.

Therefore, below are the policies regarding the aforementioned matter:

1. Illegal substances such as narcotics, stimulants, barbiturates, opiates, suppressants, hallucinogenic drugs and marijuana are strictly prohibited at the School.
2. Possession of, taking or using, buying or selling, giving or trafficking in any of these substances inside or outside school property or inside or outside school hours will be grounds for suspension, withdrawal, forced withdrawal, or expulsion of any student from the school. In order that the school may obtain material evidence of any activity described above, all students may be subject to a urine or other pathology or clinical test or to a search of their person, possessions, or locker, or any other appropriate form of inquiry by the school at any time without notice and without hindrance or obstruction from the subject of the inquiry or other persons.
3. In this Policy, action which hinders or obstructs the process of obtaining material evidence are defined as the providing of false or misleading information or of withholding information; the concealing or planting of material evidence; the coercing of a person to act dishonestly or withhold information or material evidence; the tampering with a drug testing procedure in order to mask, confuse or delay true analysis; the physical dilution or pollution of material evidence including body fluids; the issuing of threats to or the intimidation of any officer of the school or its agents; the offering of bribes or other inducements to any officer of the school or its agents; or the refusal to cooperate in the procedures for any reasons whatsoever.
4. Hindering or obstructing the process of obtaining material evidence of any prohibited activity described in above will constitute grounds for forced withdrawal or expulsion from the school.
5. The existence of reasonable suspicion that a person has hindered or obstructed the process of obtaining material evidence of any prohibited activity described above, will constitute sufficient grounds for forced withdrawal or expulsion from the school.
6. The school accepts no responsibility whatsoever for any pathology or clinical testing costs incurred as a result of implementation of a drug testing procedure by the school irrespective of the outcomes of that testing. If cost is used as a reason to refuse or delay a test this will be regarded as hindering or obstructing the procedure.
7. The school accepts no responsibility whatsoever for any other costs incurred as a result of the implementation of a drug inquiry, testing, or searching procedure by the school, for example, legal or medical costs.
8. The school accepts no responsibility whatsoever for any person who as a result of the implementation of a drug inquiry, testing or searching procedure by the school is referred to the police or other government agency or to a community support agency for example a drug rehabilitation service. Students who voluntarily seek assistance or information from the school concerning matters relating to prohibited substances will be aided by appropriate school officers. However such a voluntary action will not necessarily render a student immune from the consequences of this Policy and related procedures.
9. The Central International School Council and Global Sevilla International School Council retains the final responsibility for any actions taken by the school with respect to these policies and procedures, and will be the sole arbiter of decisions regarding the suspension, withdrawal, forced withdrawal or expulsion of students from the school or their readmission to the school.

10. The school Guidance and Counselling Unit is authorized by the school Council to retain special responsibility for initiating, coordinating and supervising all procedures related to this Policy, acting in conjunction with other senior officials of the school.
11. The parents or guardians of students enrolled in the higher secondary section of the school, shall be required to sign a document acknowledging their agreement with the provisions of this Policy and providing the school with authority to obtain results of pathology or clinical testing from the nominated clinic and authority to obtain information from community support agencies.

-End of Attachment-