



GRACE INTERNATIONAL SCHOOL

P.O. Box 32, Hang Dong, Chiang Mai 50230, Thailand

Phone: (052)088-777

E-mail: registrar@gisthailand.org

STUDENT ACCEPTANCE FORM

(Please note: all information is required information. Note N/A if not applicable)

Revised March 2018

Last Name:	First Name:	Visa Number: _____ Expiration Date: ____/____/____ (month/day/year)	Anticipated Date of Arrival in Thailand: ____/____/____ (month / day / year)
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THAILAND MINISTRY OF EDUCATION REQUIRED INFORMATION (Names are not supplied with this information)
 PLEASE COMPLETE FOR BOTH FATHER AND MOTHER:

FATHER:

MOTHER:

Occupation: <input type="checkbox"/> Government Employee <input type="checkbox"/> Private/Civil Employee <input type="checkbox"/> Business <input type="checkbox"/> Farmer <input type="checkbox"/> Self-Employed <input type="checkbox"/> Other _____ Note: "Private/Civil" includes teachers. "Other" includes missionaries, homemakers etc. NGO representatives should name the NGO. Occupation may be work pursued outside Thailand.	Occupation: <input type="checkbox"/> Government Employee <input type="checkbox"/> Private/Civil Employee <input type="checkbox"/> Business <input type="checkbox"/> Farmer <input type="checkbox"/> Self-Employed <input type="checkbox"/> Other _____ Note: "Private/Civil" includes teachers. "Other" includes missionaries, homemakers etc. NGO representatives should name the NGO. Occupation may be work pursued outside Thailand.
Annual Income: <input type="checkbox"/> Baht 0 – 150,000 <input type="checkbox"/> Baht 150,001 – 300,000 <input type="checkbox"/> Baht 300,001 or more	Annual Income: <input type="checkbox"/> Baht 0 – 150,000 <input type="checkbox"/> Baht 150,001 – 300,000 <input type="checkbox"/> Baht 300,001 or more

FINANCIAL & EMERGENCY CONTACT INFORMATION:

Who will be paying your child's tuition? <input type="checkbox"/> Parents <input type="checkbox"/> Our Business / Company <input type="checkbox"/> Our Mission
Please select which payment schedule you will use. (See the Tuition and Fees Payment Options sheet for further explanation of payment plans) <input type="checkbox"/> Annual <input type="checkbox"/> Semester <input type="checkbox"/> Quarter
1) Name: _____ Phone #: _____ 2) Name: _____ Phone #: _____

Note: Acceptance of a non-Thai student is conditional upon the student having a non-immigrant visa prior to entering school. Non-refundable enrollment fees must be paid within 4 weeks from the date on the letter of acceptance, or the first day of school if acceptance occurs less than four weeks from the first day of school. A place cannot be held without payment of enrollment fees and a student cannot enter school without a non-immigrant visa.

I have read the above statement and understand the requirements specified. I also attest that the information on this form is true and complete to the best of my knowledge.

_____ Date: _____ (Father or guardian's signature)	_____ Date: _____ (Mother or guardian's signature)
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