

International application for admission

Please print clearly in English and in BLOCK letters. Please tick boxes where appropriate.

Local representative information			
Partner name		Partner Code	

Student details					
Family name				Given names	
Preferred name				Email	
Title		Date of birth		Age	
Country of birth				Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> (please tick)	
Passport number				Passport expiry date	

Parent/alternative contact details			
Full name		Relationship to student	
Home Address			
City		State/Province	
Country		Postcode	
Email		Do you read or speak English?	
Home telephone number		Mobile telephone number	

English Language							
IELTS	Overall		Listening		Reading		Writing
Other certificates (please supply)							
<p><i>All international students must demonstrate an acceptable level of English proficiency to gain admission to the NGS's Cambridge International programme. Please provide evidence of your child's English language proficiency. Pupils with lower English may apply, but the School reserves the right to place the pupil in the Intensive Secondary English or Accelerated English Language course. For all other tests accepted by the Admissions Department, please contact the local team.</i></p>							

Education			
Current school		Grade/Year	
Curriculum		Country/State	
Language of instruction		WAM	
<p><i>Please attach verified copies of all academic transcripts or reports. Applicants who apply for Cambridge international programme should have above average academic results, good attendance records and a desire and commitment to study online. Should not enough evidence of academic ability be provided, an online interview will be requested.</i></p>			

Program selection						
Please indicate which program you would like your child to study						
Cambridge International <input type="checkbox"/>		Lower Secondary <input type="checkbox"/>		IGCSE <input type="checkbox"/>	Advanced <input type="checkbox"/>	
Number of courses		Intake	Term 1 <input type="checkbox"/>	Term 2 <input type="checkbox"/>	Term 3 <input type="checkbox"/>	Year
Course selection						
<p><i>In some cases, it is not possible to gain entry to your first choice of courses as classes may be full, particularly if your child arrives mid-year. However, we will do our best to ensure your child has a course which is suitable to them and their level of achievement.</i></p>						
Intensive Secondary English <input type="checkbox"/>						
Number of weeks		Intake	Term 1 <input type="checkbox"/>	Term 2 <input type="checkbox"/>	Term 3 <input type="checkbox"/>	Year
Short course <input type="checkbox"/>						
Name of course			Timetable selection			
Booster <input type="checkbox"/>						

Course selection		Proposed start date	
Request			
Accelerated English Language <input type="checkbox"/>	Intake	Term 1 <input type="checkbox"/>	Term 2 <input type="checkbox"/>
		Term 3 <input type="checkbox"/>	Year <input type="checkbox"/>

Disability			
Does your child have a disability, impairment or long-term medical condition?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Acquired brain impairment <input type="checkbox"/>	Hearing/Deaf <input type="checkbox"/>	Intellectual <input type="checkbox"/>	Learning <input type="checkbox"/>
Vision <input type="checkbox"/>	Mobility <input type="checkbox"/>	Medical condition <input type="checkbox"/>	Physical <input type="checkbox"/>
If your child has a disability, would you like to receive advice on support services?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Please give further details below and if necessary, attach further information to this form.			

Learning Support arrangements	
Do you require additional learning support services for your child?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, please specify the services you require	
Approved provider of learning support services	Nisai House <input type="checkbox"/> Nisai Learning Hub <input type="checkbox"/>

Future Orientation	
Do you wish your child to study abroad?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, please advise the preferred destination	
When do you wish your child to study abroad?	
Your child's future job or career goals	
The Undergraduate major that your child would like to study?	

Application checklist	
Please complete this checklist.	
Does your program selection correspond with your child's academic background and needs?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you understand the outcomes, structure and delivery mode of the program?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you completed all sections of the application form?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you read and understood the Conditions of Enrolment, including the Fee Refund policy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you attached certified copies of your child's academic transcripts?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you provided evidence of your child's English language ability?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you attached a copy of your child's passport?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you submitted a video statement of your child?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Declaration and signature <i>(This application must be signed; otherwise it will not be accepted)</i>	
I am the parent/s of the pupil named on this application form. I confirm the following:	
<ul style="list-style-type: none"> I declare that the information I have supplied on this form is, to the best of my understanding and belief, complete and correct. I understand that giving false or incomplete information may lead to the refusal of my application or cancellation of enrolment. Prior to signing I will seek independent advice on any aspects of this application form that I do not understand If I have used a representative to help me complete this application form, I accept that this representative is acting on my behalf and therefore authorise Nisai Global School to transmit any information in respect of my child's application for study, and any subsequent study details, including results and attendance, to this representative. I understand that I have the right to request Nisai Global School (in writing) to cease supplying any information about me to this representative. I agree that I have been given the opportunity to be fully informed of all course and regulatory requirements related to my child's enrolment, including the Fee Refund policy. I agree to be bound and abide by all conditions, terms, policies, and procedures applicable to my child's enrolment. 	
Parent's Signature	Date
Pupil's Signature	Date
Send this application to ask.vietnam@nisai.com or to your local representative.	