



Attach Photo
*(FOUR copies of recent
 passport-sized photos)*

| For Office Use | | | | |
|----------------|--|--|--|--|
| PC | | | | |
| S/N | | | | |
| C/N | | | | |
| Class | | | | |
| F/W | | | | |

Date of Application (dd/mm/yy)

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Level Applied For (please circle) Year 12 / 13

Intake Applied For Year : 20 Term (please circle one) : Sept / Jan / April

SECTION A - APPLICANT'S DETAILS

| | | | | |
|---|---|-------------|----------|--|
| Title | | | | |
| Full Name <i>(as per Birth Certificate / MyKAD / Passport)</i> | | | | |
| MyKAD / Passport No. | | | Gender | |
| Date of Birth (dd/mm/yy) | | Nationality | | |
| Place of Birth | | Race | | |
| | | Religion | | |
| Current Home Address | | | | |
| City | | | | |
| Town | | | | |
| State | | | Postcode | |
| Home Phone No. | - | | | |
| Mobile Phone No. | - | | | |
| E-mail Address (1 only) | | | | |
| Mailing / Billing Address <i>(if different from Home Address)</i> | | | | |
| City | | | | |
| Town | | | | |
| State | | | Postcode | |



SECTION B - DETAILS OF PARENTS / LEGAL GUARDIANS

FOR LEGAL GUARDIAN(S), PLEASE ATTACH SUPPORTING DOCUMENTS TO SHOW CUSTODY OF THE APPLICANT

Father / Legal Guardian*

**If Legal Guardian, please indicate relationship with Applicant*

Personal Data

| | | | | | | | | | | |
|---|--|---|--|-------------|--|--|--|--------|--|--|
| Title | | | | | | | | | | |
| Full Name <small>(as per MyKAD / Passport)</small> | | | | | | | | | | |
| MyKAD / Passport No. | | | | | | | | Gender | | |
| Date of Birth (dd/mm/yy) | | | | Nationality | | | | | | |
| Place of Birth | | | | Race | | | | | | |
| | | | | Religion | | | | | | |
| Mobile Phone No. | | - | | | | | | | | |
| Personal Email Address (1 only) | | | | | | | | | | |

Work Data (attach a business card)

| | | | | | | | | | | |
|-------------------------------|--|---|--|--|--|--|--|----------|--|--|
| Occupation / Designation | | | | | | | | | | |
| Company Name | | | | | | | | | | |
| Office Address | | | | | | | | | | |
| City | | | | | | | | | | |
| Town | | | | | | | | Postcode | | |
| State | | | | | | | | Country | | |
| Office Phone No. | | - | | | | | | | | |
| Office Email Address (1 only) | | | | | | | | | | |

Mother / Legal Guardian*

**If Legal Guardian, please indicate relationship with Applicant*

Personal Data

| | | | | | | | | | | |
|---|--|---|--|-------------|--|--|--|--------|--|--|
| Title | | | | | | | | | | |
| Full Name <small>(as per MyKAD / Passport)</small> | | | | | | | | | | |
| MyKAD / Passport No. | | | | | | | | Gender | | |
| Date of Birth (dd/mm/yy) | | | | Nationality | | | | | | |
| Place of Birth | | | | Race | | | | | | |
| | | | | Religion | | | | | | |
| Mobile Phone No. | | - | | | | | | | | |
| Personal Email Address (1 only) | | | | | | | | | | |

Work Data (attach a business card)

| | | | | | | | | | | |
|-------------------------------|--|---|--|--|--|--|--|----------|--|--|
| Occupation / Designation | | | | | | | | | | |
| Company Name | | | | | | | | | | |
| Office Address | | | | | | | | | | |
| City | | | | | | | | | | |
| Town | | | | | | | | Postcode | | |
| State | | | | | | | | Country | | |
| Office Phone No. | | - | | | | | | | | |
| Office Email Address (1 only) | | | | | | | | | | |



SECTION C - SIBLING(S) DETAILS (applying into/currently in Sri KDU® International School/Sekolah Sri KDU®)

| Name of Sibling | Name of School | Level |
|-----------------|----------------|-------|
| | | |
| | | |
| | | |
| | | |
| | | |

SECTION D - ACADEMIC HISTORY

| Name of School | Country | Start (mm/yy) | End (mm/yy) | Highest Level | Reason for Leaving |
|----------------|---------|---------------|-------------|---------------|--------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

SECTION E - FEE PAYMENT (Billing Person). Note: If there are any refunds applicable, it will be made to this Billing Person.

Please tick one Father Mother Others
If "Others" is selected, please complete the following and provide a copy of MyKAD/Passport and signed authorisation letter from parents/legal guardian:

| | |
|-----------------------------|--|
| Title | |
| Name | |
| MyKAD / Passport No. | |
| Mailing Address | |
| Home / Office Phone No. | |
| Mobile Phone No. | |
| Fax No. | |
| Email (1 only) | |
| Relationship with Applicant | |

SECTION F - MAIN CONTACT PERSON (for school communication and emergency purposes)

Please tick one Father Mother Others
If "Others" is selected, please complete the following and provide a copy of MyKAD/Passport and signed authorisation letter from parents/legal guardian:

| | |
|-----------------------------|--|
| Title | |
| Name | |
| MyKAD / Passport No. | |
| Home / Office Phone No. | |
| Mobile Phone No. | |
| Fax No. | |
| Email (1 only) | |
| Relationship with Applicant | |



SECTION G - DECLARATION AND ACCEPTANCE BY PARENT / GUARDIAN

TERMS OF PAYMENT, WITHDRAWAL AND RE-ADMISSION

Definition:

An **Applicant** of Sri KDU® International School (IBDP) - a child who has registered, met the School's entry requirements and has paid the **Entry Fees** (Registration Fee and Fee Deposit).

A **Student** of Sri KDU® International School (IBDP) - an applicant who has paid the **Entry Fees** and **School Fees** in full by the due dates advised by the School.

TERMS OF PAYMENT

1. Registration Fee

1.1 This fee is payable in full upon submitting a completed and signed registration form for your child/ward with the school. It is non-refundable and non-transferable unless the School rejects the application due to not meeting the School's entry requirements.

2. Fee Deposit

2.1 Upon receiving the Acceptance Letter from the School, full payment of the Fee Deposit should be made by the due date stated in the letter. This is to confirm a place for your child/ward at the School. If the School does not receive the full payment of the Fee Deposit by the due date stated in the Acceptance Letter, the School reserves the right to offer the place to another child on the waiting list.

2.2 The Fee Deposit is non-interest bearing. It has to be maintained throughout the tenure of the student with the School and shall under no circumstances be treated as payment for School Fees or any part thereof or for any other payments required to be paid and may not be used to set-off any amount due and payable by the parent/guardian.

2.3 For students who have **completed Year 13**, the Fee Deposit will be refunded at the end of the academic year (within the month of August) provided there is no outstanding amount owing by such students to the School.

3. School Fees

3.1 The parent/guardian undertakes to promptly pay all the fees applicable in each term in respect of each school year **prior** to commencement of that term. If the parent/guardian defaults in payment due and payable, strictly without prejudice to the rights of the School in respect of any other term enumerated herein, the School reserves the right to refuse entry to the School to any student. The School reserves the right to de-register the student if School Fees remain unpaid upon commencement of the term. The Fee Deposit cannot be used to offset School Fees. The School also reserves the right to withhold all examination results, certificates, school records of the child and the Fee Deposit until such time when all payments due in respect of the student are received from the parent/guardian. A late payment surcharge of 5% will be levied upon all overdue fees.

3.2 Parents or the legal guardian of the student are jointly and severally liable for the payment of fees, save where specific written agreement to the contrary has been obtained. School Fees must be paid even in the case of absence due to injury, illness or any other cause.

3.3 Payment of fees can be made in cash, by credit card or crossed cheques made payable to **Sri KDU Sdn Bhd**. Split credit card payments using the same credit card number will be subjected to an administration charge of RM10.00 per transaction. Our Payment Counter Hours are from 8am to 6pm, Mondays to Fridays (closed on Saturdays, Sundays and Public Holidays).

3.4 The School reserves the right to recover outstanding sums owed to the School without further reference to you.

3.5 Year 13 Students:

3.5.1 To register for the IBDP exams as a Sri KDU® International School (SKIS) candidate, Year 13 students must be fully enrolled for all the three (3) terms of the Year 13 programme at SKIS.

3.5.2 To be fully enrolled for all the three (3) terms at SKIS, School Fees and any outstanding fees must be fully paid by the due dates set by the School. If School Fees and/or any outstanding fees are not fully paid for any of the three (3) terms, the School reserves the right not to register or allow the student to sit for the IBDP exams at SKIS and/or not allow the student to attend classes and school activities.

3.5.3 Upon commencement of term, **School Fees** are not refundable or allowed to be offset in any circumstances.

3.5.4 **Exam fees** paid for the IBDP exams are not refundable as the International Baccalaureate Organisation (IBO) does not refund exam fees after the closing date of the registration of IBDP exams. Exam fees are also not transferable and cannot be used to offset any fees owed to the school as the fees are paid directly to IBO.

TERMS OF WITHDRAWAL

1. For an Applicant

1.1 In the event the applicant decides not to enrol in the School after paying the Fee Deposit, the Fee Deposit will be refunded if a written and signed notice of withdrawal by the registrant parent/guardian is received by the Registrar at least **three months (3) before commencement of the school intake**.

2. For a Student

2.1 To qualify for the refund of the Fee Deposit, the following terms must be complied with:

2.1.1 Notice of withdrawal of the student from School should be made in writing and signed by the registrant parent/guardian, and received by the Registrar at least **three (3) months before the student's last day of school**;

2.1.2 Tuition fees must be fully paid for the three (3) months' withdrawal notice period (this is regardless of whether the student attends School during the three (3) months' withdrawal notice period) or right up to the student's last day of school, whichever is later;

2.1.3 The Miscellaneous Fee, which is payable termly and non-proratable, must be fully paid right up to the end of the academic term in which the student's last day of withdrawal falls within; and

2.1.4 There is no outstanding amount owing by the student to the School.

Note: Student's last day of school refers to the student's last day of paid Tuition Fees.

2.2 If the student withdraws before the commencement of the new term, the School Fees for that new term shall be refunded. However, should the student withdraw **after the new term has commenced, there shall be NO refund of any fees**.

3. All withdrawals are subject to an administrative charge of RM200.00. If there are any refunds applicable, the School will issue a cheque within two months from the student's official last day of school. Refunds are subject to terms and conditions.

4. Any notice of withdrawal that is conditional will not be accepted by the School.

TERMS OF RE-ADMISSION

1. A student who has withdrawn from the School and applies for re-admission at a future date shall be subjected to the following:

1.1 Approval from management;

1.2 Availability of places;

1.3 Providing valid reasons justifying the re-admission;

1.4 Settlement of any outstanding sum owed to the school;

1.5 Full payment of fees applicable to the intake applied for, which are:

1.5.1 Entry Fees (Registration Fee and Fee Deposit); and

1.5.2 School Fees.

Declaration and Acceptance by Parent / Legal Guardian

I,.....MyKAD/Passport No.....

father / mother / legal guardian* of enrolling for Level for the Intake (month/year)

declare that the information given in this form is accurate and true. I understand and accept the terms and conditions for the enrolment of my child / ward* at Sri KDU® International School (International Baccalaureate Diploma programme). I also understand and undertake to ensure that my child / ward* abides by the rules and regulations of Sri KDU® International School (International Baccalaureate Diploma programme) as stated in the latest School Handbook and that he / she* is bound by its **Code of Conduct**.

.....
 Signature of Father / Mother / Legal Guardian*

*cross out where not applicable

.....
 Date



SECTION H - MEDICAL HISTORY & SPECIAL NEEDS

Is there any health or medical condition that requires the attention of the School? (e.g. epilepsy, asthma, migraine)

No Yes (if yes, please describe).....

Is there any physical or audio / visual impairments (temporary or permanent) that your child / ward is suffering from?

No Yes (if yes, please describe).....

Please be advised that all parents / guardians who have a special needs child / ward, where they have knowledge (either directly or indirectly) of the status of their child / ward, are required to declare this information to the School prior to the Registration of the child/ ward with the School.

**Special needs children are classified as either having Dyslexia, Attention Deficient Disorder (ADD), Autism, Extreme Hyperactivity or any other such condition.*

Please confirm whether your child / ward falls into any of these categories (please tick the relevant response):

| | |
|--|---|
| <input type="checkbox"/> Normal | <input type="checkbox"/> ADD – High Functionality |
| <input type="checkbox"/> Autism | <input type="checkbox"/> ADD – Low Functionality |
| <input type="checkbox"/> Dyslexia – High Functionality | <input type="checkbox"/> Extreme Hyperactivity |
| <input type="checkbox"/> Dyslexia – Low Functionality | <input type="checkbox"/> Others, please specify _____ |

Please be advised that in instances where the parents / guardians have not informed the School of any medical, physical or special needs condition that is attributable to the student, the School reserves the right to withdraw the student from the school where as a consequence of the student’s conduct, there is disruption to the classes and / or disturbance to the other students. The School also reserves the right to withdraw the student from the school in instances where the student requires specialised personal or medical attention from any party which is not within the scope and expertise of the staff at the School.

While we endeavour to do everything in our ability to assist your child / ward in his / her learning process and encourage and stimulate their learning opportunities positively at our school, we would like to confirm that if we find that your child / ward is unable to cope in class or with our teaching-learning environment, or that as a consequence of your child / ward, the teacher is unable to give attention to other students in the class, the school reserves the right to withdraw your child / ward from the school.

In such a situation, the Management confirms that the school fees will be pro-rated according to the number of school days attended and any excess in fees paid will be refunded to the parents.

Note:

In the event of any medical emergency and if the school is unable to contact the parent / guardian of the student concerned, the school is hereby authorised to seek medical attention for the student from the nearest available qualified practitioner or hospital and the school and its staff shall not be held responsible for any medical treatment administered to the student or for any medical charges incurred.

Declaration and Acceptance by Parent / Legal Guardian

I, MyKAD/Passport No.....

father / mother / legal guardian* of enrolling for Level..... for the Intake (month/year).....

confirm that I have read and understood the contents of this page. I also hereby declare that I shall abide by the terms of this declaration and understand that this is not any discrimination practised by the School but based on the ability of the School to handle the specific needs of my child / ward*.

.....
 Signature of Father / Mother / Legal Guardian*
 *cross out where not applicable

.....
 Date



SECTION I - USE OF PERSONAL DATA

PERSONAL DATA PROTECTION NOTICE AND CHOICE PRINCIPLE NOTIFICATION AND CONSENT

Pursuant to sections 7 and 6, respectively, of the Personal Data Protection Act 2010
(Please read the attached Personal Data Protection Notice and sign off only ONE of the following)

Consent for Purposes A and B

I have fully read and understood this Personal Data Protection Notice and Choice Principle Notification ("Notification"). By signing this Notification, I consent to the use of my Personal Data and the Personal Data of my child/ward (as parent/legal guardian to a minor below 18 years of age) for both Purposes A and B, in accordance with the terms of this Notification.

Acknowledged by:

.....
 (Signature of Parent/Legal Guardian)

| | |
|-------------------------------|-----|
| Name of Parent/Legal Guardian | |
| MyKad/Passport No. | |
| Date (dd/mm/yyyy) | / / |

Consent for Purpose A ONLY

I have fully read and understood this Personal Data Protection Notice and Choice Principle Notification ("Notification"). By signing this Notification, I consent to the use of my Personal Data and the Personal Data of my child/ward (as parent/legal guardian to a minor below 18 years of age) for Purpose A ONLY, in accordance with the terms of this Notification.

Acknowledged by:

.....
 (Signature of Parent/Legal Guardian)

| | |
|-------------------------------|-----|
| Name of Parent/Legal Guardian | |
| MyKad/Passport No. | |
| Date (dd/mm/yyyy) | / / |

FOR OFFICE USE ONLY

Marketing Department

Counselled by : Date :

Checklist :

| | |
|---|--|
| <p><u>Malaysian Applicant</u></p> <p>One copy of student's Birth Certificate <input type="checkbox"/></p> <p>One copy of student's MyKAD <input type="checkbox"/></p> <p>Four recent passport-sized photographs <input type="checkbox"/></p> <p>One copy of each parent's MyKAD / Passport (<i>page on particulars only</i>) <input type="checkbox"/></p> <p>One copy of each parent's Business Card <input type="checkbox"/></p> <p>One certified copy of most recent full school report <input type="checkbox"/></p> <p>One certified copy of actual SPM results <input type="checkbox"/></p> | <p><u>International Applicant</u></p> <p>One copy of student's Passport (<i>whole book</i>) <input type="checkbox"/></p> <p>Four recent passport-sized photographs <input type="checkbox"/></p> <p>One copy of each parent's MyKAD / Passport (<i>page on particulars only</i>) <input type="checkbox"/></p> <p>One copy of each parent's Business Card <input type="checkbox"/></p> <p>One certified copy of most recent full school report <input type="checkbox"/></p> <p>One certified copy of actual IGCSE results (or equivalent) <input type="checkbox"/></p> |
|---|--|

Remarks :

Registry Department

Date Student Registered :

Entrance Test Date/Time :

Application Processed by :

Remarks :

Bursary Department

Registration Fee Collected by : Date : Receipt No. :

Deposit Collected by : Date : Receipt No. :

Remarks :