

APPLICATION FORM

WESLEY METHODIST SCHOOL IPOH

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WESLEY
METHODIST
SCHOOL
IPOH
(PRIVATE)



WESLEY
METHODIST
SCHOOL
IPOH
(INTERNATIONAL)

School applying to ☐ WMSI International ☐ WMSI Private

Applying for Year/Form _____

Proposed Intake Date ☐ August ☐ January

Boarding: ☐ Not required ☐ 7 Days ☐ 5 Days

Passport Size
Photo

Section A: STUDENT INFORMATION

Full Name (as stated in NRIC/Passport) _____

Preferred Name _____

Date of Birth _____

Identification No ☐ NRIC _____

☐ Birth Certificate _____

☐ Passport _____

Gender ☐ Male ☐ Female

Country of Birth _____

Nationality _____

Religion _____

Home Address _____

Postcode _____ City/State _____ Country _____

Contact No (Home) _____ Student Mobile (if any) _____

Languages (Spoken) _____

Languages (Written) _____

Educational Details

Pre-School Name	Country/City	Type of Curriculum	Year (from-till)	Completed Level of Study

Primary School Name	Country/City	Type of Curriculum	Year (from-till)	Completed Level of Study

Secondary School Name	Country/City	Type of Curriculum	Year (from-till)	Completed Level of Study

Special Skills/Interests (e.g. Sports, Music, Dance, Art, etc.)
Involved in any serious disciplinary action? [☐] Yes [☐] No If yes, please explain

Section B: FAMILY INFORMATION

Parents' Marital Status

[☐] Married [☐] Separated [☐] Widowed [☐] Unmarried (If "Unmarried", please attach Commissioner of Oath declaration stating name of parents)

Are there any Family Court Orders in place?

[☐] No [☐] Yes (If "Yes", please attach a copy of court order)

Information of [☐] Father [☐] Guardian

Full Name _____ Preferred Name _____
 Nationality _____ NRIC /Passport No _____
 Country of Passport _____ Malaysia PR [☐] Yes [☐] No Type of Visa _____
 Home Tel. _____ Mobile _____ Email _____
 Company Name _____ Designation / Job Title _____
 Office Telephone _____ Office Email _____
 Office Address _____
 Postcode _____ City / State _____ Country _____
 Relationship to the student (for Guardian): _____

Information of [☐] Mother [☐] Guardian:

Full Name _____ Preferred Name _____
 Nationality _____ NRIC /Passport No _____
 Country of Passport _____ Malaysia PR [☐] Yes [☐] No Type of Visa _____
 Home Tel. _____ Mobile _____ Email _____
 Company Name _____ Designation / Job Title _____
 Office Telephone _____ Office Email _____
 Office Address _____
 Postcode _____ City / State _____ Country _____
 Relationship to the student (for Guardian): _____

Information of Sibling, if any

NO	NAME	CURRENT SCHOOL	DATE OF BIRTH	LEVEL	SEX

Section C: BILLING INFORMATION

Attention Correspondence and Bills to:

☐ Father ☐ Mother ☐ Guardian

Mail to

☐ Home Address ☐ Father's Office ☐ Mother's Office

Fees will be paid by

☐ Parent	☐ Grandparent	☐ Parents' Employer
☐ Guardian	☐ Agent	☐ Other

Preferred Method of Payment

☐ Cheque ☐ Cash ☐ Bank Transfer

If billing should be sent to another person / address, please provide information below:

Full Name _____	Preferred Name _____
Nationality _____	NRIC /Passport No _____
	Country of Passport _____
Malaysia PR ☐ Yes ☐ No	Type of Visa _____
Home Telephone _____	Mobile _____ Email _____
Company Name _____	Designation / Job Title _____
Office Telephone _____	Office Email _____
Office Address _____	
Postcode _____	City / State _____ Country _____

Section D: EMERGENCY CONTACT

Contact priority in case of emergency:

☐ Father ☐ Mother ☐ Guardian

If person(s) listed above are not reachable, please contact:

Name (1) _____

Relationship to the student _____

Home Tel _____ Mobile _____

Email _____ Office Telephone _____

Name (1) _____

Relationship to the student _____

Home Tel _____ Mobile _____

Email _____ Office Telephone _____

Section E: AGREEMENT & DECLARATION

I / We parent / guardian of child confirm that I / We have read and fully understand the terms and conditions and the nature and effects thereof. I hereby expressly confirm my / our agreement thereto.

I / We will support the School in the application of its policies and procedures and that my child / ward will comply with all the requirements of the policies, rules, and regulations of the School and thus undertake to perform all such obligations and / or comply with all terms and conditions set out on my / our part to be performed or complied with, particularly but not limited to payment of all monies payable to the School. I / We hereby undertake and agree that in the event that Wesley Methodist School Ipoh shall exercise its rights to forfeit all / any fees and / or Deposit(s), I/We shall not have any claim whatsoever against the School.

I / We acknowledge that the withholding or non-disclosure of any relevant information relating to my child's / ward's physical, medical or educational needs may affect my child's / ward's application for enrolment and admission as a student of the School. I agree that any offer of placement is conditional on the accuracy of the information provided by me /us.

Signature of Father / Guardian:

Name

NRIC / Passport No :

Date:

Signature of Mother / Guardian:

Name

NRIC / Passport No :

Date:

APPLICATION CHECKLIST

This checklist is provided to assist you through the application process. Please complete and submit the following to the Marketing Office for consideration:

NO	CHECKLIST	TICK (✓)	REMARK
1	Student' Application Form		
2	A non-refundable and non-transferable Application Fee		
3	1 Photocopy of Child's Birth Certificate		
4	1 Photocopy of Child's Identity Card / Mykad / Passport		
5	1 Photocopy of Child's Visa (Foreign Students)		
6	1 Photocopy of each Parent's/Guardian's Identity Card /Passport / Working Visa (Foreigner)		
7	1 Photocopy of Parent's Marriage Certificate		
8	1 Photocopy of Legal Custody Document (if divorced)		
9	1 Business Card of each Parent/Guardian (if any)		
10	2 Recent Colour Passport-size Photographs of Child		
11	1 Photocopy of Child's Previous/Current Academic Report/School Leaving Certificate		
12	Confidential Medical Report of Child		

OFFICE USE ONLY

☐	Accepted
☐	Rejected
☐	Deferred
☐	Conditional
☐	Cancelled
☐	Discount (if applicable)

Entry Level Offered:

☐	Junior Year
☐	Senior Year (WMSII)
☐	Senior Year (WMSIP)

COMMENT:

