



< **ENROLLMENT FORM** >

**STUDENT INFORMATION**

**\* Please provide a copy of student's ID card (for verification purpose)**

Name : \_\_\_\_\_ Gender  M  F

Date of Birth (DD / MM/ YY) : \_\_\_\_\_

ID card / Passport number : \_\_\_\_\_

Home Address : \_\_\_\_\_

**STUDENT'S LANGUAGE BACKGROUND**

Student's Native Language : \_\_\_\_\_

Student's Spoken language at home : \_\_\_\_\_

**ADDITIONAL INFORMATION**

Information of your previous school (please choose one)

a. Public School   b. Private School   c. Homeschooling Centre   d. Others

Name of Institution : \_\_\_\_\_

Medium of Instruction : \_\_\_\_\_

1. Has the student ever been asked to leave a school ? ( Yes, No )

If Yes, please provide details \_\_\_\_\_

2. Has the student been involved in serious disciplinary action ? ( Yes, No )

If Yes, please provide details \_\_\_\_\_

3. Does the student have any health concerns or medical conditions ? ( Yes, No )

If Yes, please provide details \_\_\_\_\_

4. Does the student have any physical disabilities, learning difficulties or psychological needs?

(Yes, No )

If Yes, please provide details \_\_\_\_\_

5. Friendship and socialising patterns (please choose one)

- a. Makes friends easily and quickly
- b. Is initially shy with people
- c. Prefers a small group of close friends
- d. Has difficulty in making friends

6. Any information you would like the teachers to take note about the student :

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7. Has the child been in an English as a Second Language Programme besides the school English lessons ? ( Yes, No )

If Yes, please provide details

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8. How did you hear of Regent Park Academy? (please choose one)

- a. through friends or relatives whose children are already enrolled with the centre  
please state the name of student : \_\_\_\_\_
- b. blog / website information
- c. Others : \_\_\_\_\_

9. What are your reasons for choosing this programme for your child?

- a. Because I intend to send my child to study in an English-speaking country later
- b. To obtain an English-medium education
- c. Unable to cope in the conventional school system
- d. Others \_\_\_\_\_

**Parent/Guardian INFORMATION**

**\* Please provide a copy of parent's ID card (for verification purpose)**

**1. Information of Father**

Dr. / Datuk / Mr. Name : \_\_\_\_\_  
Date of Birth (DD / MM/ YY) : \_\_\_\_\_ Nationality : \_\_\_\_\_  
ID card / passport number : \_\_\_\_\_  
Company Name : \_\_\_\_\_  
Type of Industry : \_\_\_\_\_ Designation/ Job Title : \_\_\_\_\_  
Mobile Phone : \_\_\_\_\_ Email : \_\_\_\_\_

**2. Information of Mother**

Dr. / Datuk / Ms. Name : \_\_\_\_\_  
Date of Birth (DD / MM/ YY) : \_\_\_\_\_ Nationality : \_\_\_\_\_  
ID card / passport number : \_\_\_\_\_  
Company Name : \_\_\_\_\_  
Type of Industry : \_\_\_\_\_ Designation/ Job Title : \_\_\_\_\_  
Mobile Phone : \_\_\_\_\_ Email : \_\_\_\_\_

**3. Information of Guardian (if the student does not live with parents)**

Dr. / Datuk / Mr. / Ms. Name : \_\_\_\_\_  
Date of Birth (DD / MM/ YY) : \_\_\_\_\_ Nationality : \_\_\_\_\_  
ID card / passport number : \_\_\_\_\_  
Company Name : \_\_\_\_\_  
Type of Industry : \_\_\_\_\_ Designation/ Job Title : \_\_\_\_\_  
Mobile Phone : \_\_\_\_\_ Email : \_\_\_\_\_

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**FOR OFFICE USE**

Accepted in Grade Level (YEAR 7   YEAR8   YEAR9   YEAR10   YEAR11 )  
Date of commencement: \_\_\_\_\_  
Diagnostic Test taken on \_\_\_\_\_  
Test Grades : English \_\_\_\_\_ Mathematics \_\_\_\_\_ Science \_\_\_\_\_  
Special Remarks : \_\_\_\_\_

## **Agreement between the centre and parents/guardians**

It is of vital importance that the centre should facilitate safe, secure and caring environment for our students to learn and reach their respective potentials. The following expectations/agreements are presented with the above in mind. We aim to adhere consistently to these guidelines which would help us to limit surprises and enhance learning for your child(ren). Your cooperation and encouragement will definitely assist us in providing an exceptional education for your child(ren).

1. I/We agree to support and be bound by the rules and policies governed by RPA.
2. I/We agree to allow RPA to execute emergency measures in the event of accidents and illness and understand that I will be notified as soon as possible.
3. I/We agree that it is our obligation that fee due should be paid on time, I/We understand that failure to pay on or before the requested date has consequences, which include the possible exclusion of my child from attending classes at RPA.
4. I/We agree that it is our obligation to notify RPA in the case of withdrawing my child from the centre. I/We are aware that the refundable deposit is only released upon fulfilling the provision of one-term notice and a year of attendance at RPA.
5. I/We agree that RPA may at its discretion, suspend or terminate a student's attendance if the students repeatedly fails to comply with the rules and regulations or is displaying unacceptable social behavior and manners that could cause harm to the other students.
6. I/We are aware of and agree to the idea of electronic gadgets such as mobile phones and games are not allowed to be brought into RPA. These items will be confiscated for a term or a period of time, no excuses or reasons would be entertained.
7. I/We are aware that expensive personal belongings should not be brought into RPA, the centre is not liable for any loss and damages to such belongings.
8. I/We are aware and agree to the regular spot checks being performed at RPA to ensure no unpermitted objects and drugs, indecent magazines and gadgets to be brought in by students.
9. I/We agree that we are responsible to bring our child to school on time and pick them up at agreed time. RPA is not liable for my child's safety if my child has been instructed by me to wait at a pick up point other than within the centre.
10. I/We agree it is our responsibility to keep updated by referring to the online announcement and notices posted in the parents' group chat.
11. I/We agree that student work, photographs, images and recordings can be used for instructional media and RPA marketing materials.

Signature and name of parent \_\_\_\_\_ Date \_\_\_\_\_