



APPLICATION FORM

Artschool preliminary Application Form:

Please type or print this form, fill out all fields, sign and date, then scan and send us by email or send to our office.

Child's information

Child's Surname:		Child's First Name:	
Birth Date: (mm/dd/yy): ____/____/____	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Country of Birth:	Nationality Other:.....
Ability to write and read Vietnamese?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Others		
Ability to write and read English?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Others		
Ability to colour and Draw?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Others		
Address:			

Parents' information

Father/ Guardian	Mother/ Guardian
Full name:	Full name:
Handphone	Handphone:
Occupation:	Occupation:
Occupation Address:	Occupation Address:
E-maill address:	Email address:
Home phone:	
Permanent Address:	
Current adress:	

EMERGENCY CONTACT

Full Name:	
Home Address:	
Handphone:	Home phone number:
Work / Office Phone number:	Relation to Child :

Other Children (who are relatives or friends of your child, study at the Artschool)

Full name/ Name:	Age:	Relationship with your child:
Full name/ Name:	Age:	
Full name/ Name:	Age:	

Date:...../...../20.....

Applicant's Signature

(sign, full name, This form should be signed by parents or guardian)

Name: _____