



Please complete all sections in block letters.

## SECTION 1 (STUDENT DETAILS)

### PERSONAL PARTICULARS

Legal forename

Legal surname

Preferred forename

Date of birth

Age  Gender: Male  Female

Year group applied for

Preferred start date

Nationality

Passport / NRIC

Race (Malaysians only)

Religion

### Further Information

- Has your child ever seen an Educational Psychologist / Occupational Therapist / Psychiatrist / Counsellor / Speech Therapist / other specialist / or has had any educational psychology assessment? Yes  No

If yes, please indicate:

- Has your child ever received any special help or ever attended special classes for any learning, social, emotional or behavioral concerns? Yes  No

If yes, please indicate:

### Medical Needs

- Does your child have any medical condition? Yes  No

If yes, please indicate:

- Is your child on any prescription drugs? Yes  No

If yes, please indicate:

Please indicate any other concerns which might affect your child's participation in the classroom or during Physical Education / swimming lessons etc.

### Education History

Name of Current School

Address

## SECTION 2 (FAMILY DETAILS)

### Parents

Father's name	<input type="text"/>
Nationality	<input type="text"/>
NRIC / Passport No.	<input type="text"/>
Correspondence address	<input type="text"/>
Email	<input type="text"/>
Mobile No.	<input type="text"/>
Place of work	<input type="text"/>
Position	<input type="text"/>
*Tax Identification Number (TIN No)	<input type="text"/>

Mother's name	<input type="text"/>
Nationality	<input type="text"/>
NRIC / Passport No.	<input type="text"/>
Correspondence address	<input type="text"/>
Email	<input type="text"/>
Mobile No.	<input type="text"/>
Place of work	<input type="text"/>
Position	<input type="text"/>
*Tax Identification Number (TIN No)	<input type="text"/>

\*The TIN number is required by the Inland Revenue Board of Malaysia (IRBM) for e-invoicing purpose.

### Guardian

Guardian's name	<input type="text"/>
Correspondence address	<input type="text"/>

Email	<input type="text"/>
Mobile No.	<input type="text"/>
Relationship	<input type="text"/>

### Siblings (Please provide details of siblings who currently studying at SJIIS)

Name	<input type="text"/>
Name	<input type="text"/>
Name	<input type="text"/>

Year Group	<input type="text"/>
Year Group	<input type="text"/>
Year Group	<input type="text"/>

## SECTION 3 (For International Students)

Do you need a student pass?      Yes       No

## SECTION 4 (DECLARATION)

I confirm that the above information and statements are true and correct. I understand that any false or misleading statements, or the withholding of relevant information relating to this application might invalidate the application and that the school may withdraw an offer of a place or cancel the enrolment of my child in consequence.

Name

Date

Signature

Relation to Student

## SECTION 5 (ADMISSIONS PROCEDURE)

All applicants to St. Joseph's Institution International School are required to complete the entrance assessment. The nature of the assessment will depend on the year group of the child. If the applicant is offered a place at SJIS, the offer is conditional of the parents signing SJIS's Terms and Conditions.

Please complete the following checklist and ensure that all required documents are attached.

- All applicable sections of the Application Form have been completed
- Conditions of Entry Form
- Consent to Use Photos / Videos form
- A copy of the student's birth certificate
- A copy of the most recent school report
- For Malaysian applicant: A copy of the applicant's NRIC/MyKid
- For International applicant: A copy of the applicant's passport bio page
- A copy of the father's NRIC / passport bio page
- A copy of the mother's NRIC / passport biopage
- Non-refundable application fee as per the Schedule of Fees. All cheques for payment of fees must be "crossed" and made payable to "Ever Radiant Sdn Bhd"



THE  
DE LA SALLE BROTHERS  
VENTURING FORWARD IN ASIA  
SINCE 1852



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