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| **Kawasaki Campus**(Nursery - Grade 1)Reimei Kawasaki building,5-5 Enokicho, Kawasaki-Ku,Kawasaki 〒 210-0002Phone: 044 276 9494 | * www.kohanainternationalschool.com

office@kohanainternationalschool.comMonday - Friday: 9:00 - 18:00+81 90-9972-0737**Admission Inquiry** |  **Tsurumi Campus**(Grade 2 - Cambridge IGCSE)1 Chome-33-6 HigashiteraoTsurumi Ward, YokohamaKanagawa 〒 230-0077Phone: 045 642 8628 |

|  |  |
| --- | --- |
| **Date Of Inquiry**  | (dd / mm /yyyy) |
| **Child’s Full Name** | (dd/mm/yyyy) |
| **Date Of Birth** |  |
| **Gender** | Male Female |
| **Nationality** |  |
| **Current School/ Grade** |  |
| **Grade Looking For** |  |
| **Languages Known** | **Beginner** | **Fluent** | **Native** |
| **ENGLISH** |  |  |  |
| **JAPANESE** |  |  |  |
| **Mother Tongue** |  |
| **Sibling 1** |  |
| **Sibling 2** |  |
| **Identified Learning Needs/Disabilities(if any):**  |  |
| **Home Address** |  |
|  | **FATHER** | **MOTHER** | **GUARDIAN** |
| **Full Name** |  |  |  |
| **Occupation** |  |  |  |
| **Company Name** |  |  |  |
| **Mobile** |  |  |  |
| **Landline** |  |
| **E-Mail Address** |  |  |  |
| **How Did you get to know about our School?** | * Friends studying here
* Internet
* Facebook
* Word of Mouth
* Any other medium ( please specify)-
 |
| **References if any** |  |

**REMARKS – OFFICE USE ONLY**

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| **School Visit/Trial Day/Assessment Day** |  |
| **Joining Date** |  |
| **Follow Up (If needed)** |  |