

Ping Shek Kingsland Kindergarten

Enrolment form for new student

Given Name:		Surname:		(Photo)
Class: (A.M/P.M)		Nationality:		
Sex:	Age:	Place of Birth:		
Date of Birth:		Religion:		
Address:		Tel (H):		

Family Status

Parents or Guardian	Father's:		Occupation:
	Mother's name:		Occupation:
	Guardian's name:		Occupation:
No. of brothers:	No. of family member in employment:	Tel (Office):	
No. of sisters:	No. of family member in studying	Tel (emergency):	
Parent's / Guardian's office address:			
			Date:

To be filled in by school

Name of student:	Date of interview:
Result:	Class enrolled:
Approved by: _____ Date: _____	