Student No:______
Date of Entrance: ______



Please attach a current photo, if available.

Please print al	l information.
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Applicant's Name:								
	first middle		last					
Preferred Name:		Applicant's birth date:						
				day	month	year		
Home Language:			Current Grade:					
Previous school(s)								
	address							
	phone							

	Parent:				Parer	nt:			
Parent title	Dr.	Mr.	Mrs.	Ms.		Dr.	Mr.	Mrs.	Ms.
Full name									
Preferred Name									
Place of birth									
Address (street)									
(city, state, ZIP code)									
Phone (home)									
Phone (mobile)									
Email									
Employer									
Job Title									
Business location									
Business phone									

Names of other children in the household, birth dates, grades, and schools attended:

Please list any family members who have attended our School.

Name	Class	Relationship to Applicant	
Name Class Relationship to Applicant		Relationship to Applicant	
Emergency contact.			
Name	Tel:	Relationship to Applicant	

How did you become interested in Oak Meadow School (check all that apply)?

□ School administrator or teacher	Name:
Current student or family	Name:
Educational consultant	Name:
C Relative	Name:
C Realtor	Name:
Chool fair	Location:
U Website	Location:
Advertisement	Title of publication:
□ Other	Name:

I hereby certify that all statements made in this application form are true, complete, and correct. I also understand the deposit will be refunded on the permanent withdrawal of the student. The child must be enrolled until end of the academic school year. The withdrawal form must be filled in and given to the school office at least one month before school ends, it means must be before the 1st of June each year. I understand and will obey all school regulations that stated in the parent's hand book.

OMIS does not discriminate on the basis of race, color, sex, handicap, religion or national origin. OMIS reserves the right at its sole discretion to refuse an application or dismiss a child from school. No refund will be made of fees if the child has attended any portion of the term period.

I give permission to photograph and/or videotape my child for public relations and/or marketing purposes. Photos will remain archived at and can be used for promotional purposes without notification. As well as CCTV for security purpose.

Conditions for School Fee Refund

- For a refund of Term 1 school fees, written notice of a student's withdrawal must be submitted to the Admin 60 days before the first day of Term 1.
- For a refund of Term 2 school fees, written notice of a student's withdrawal must be submitted to the Admin **30 days before** the first day of Term 2.
- For a refund of Term 3 school fees, written notice of a student's withdrawal must be submitted to the Admin 30 days before the first day of Term 3.

Parent Signatur	e:	Date:	
Administrator:		Date:	