



Expression of Interest Form

Details of the child

Surname: _____ First name/s: _____

Date of birth: ____ / ____ / ____ Male / Female: _____

Nationality: _____

Name of school which the child is attending now: _____

Which Curriculum: _____ Actually In Grade/Year/Form _____

Actual school academic year starting (month) _____ and ending (month) _____
(Westcoast International Secondary School academic year starting in January and ending in November)

When do you wish to enrol your child at WISS (Month) _____ (Year) _____ in Form _____

Details of the parents / guardians

Father

Surname: _____ First name/s: _____

Contact tel: _____ Nationality: _____

Occupation: _____ email address: _____

Local home address: _____

Mother

Surname: _____ First name/s: _____

Contact tel: _____ Nationality: _____

Occupation: _____ email address: _____

Local home address: _____

Date: _____

Signature: _____

(Office use after seat availability checked)

Date received _____ By (email/visit): _____

Should Integrate Form _____ Month/Year _____ Waiting list Confirmed

Meeting/Assessment scheduled _____