

# International School Yangon

## Student Application Form (2009-2010)



Please attach photo here

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 Bahan Township, Yangon, Myanmar  
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DEPARTMENT OF STATE  
 4250 RANGOON PLACE  
 WASHINGTON D. C. 20521 – 4250

**Upon filing of an application, full payment of the application fee is due. Application fee is non-refundable**

PLEASE TYPE OR PRINT CLEARLY

**STUDENT'S NAME**

\_\_\_\_\_ (Surname) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) Sex: \_\_\_\_\_

Name called in school: \_\_\_\_\_ Current Age: \_\_\_\_\_

Applying for Grade: \_\_\_\_\_ Anticipated starting date: \_\_\_\_\_

Residence in Yangon: \_\_\_\_\_ Home Tel: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
mo day yr

First language: \_\_\_\_\_ Primary language spoken at home: \_\_\_\_\_

Other languages: \_\_\_\_\_ Years of English instruction: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Country of issue: \_\_\_\_\_

**PARENT INFORMATION**

A. Father's Full Name: \_\_\_\_\_ Nationality: \_\_\_\_\_  
(Surname) (First) (Middle)

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

B. Mother's Full Name: \_\_\_\_\_ Nationality: \_\_\_\_\_  
(Surname) (First) (Middle)

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Contact numbers are required so that we can communicate with you throughout the admissions process. Enter the best phone number, fax, or e-mail address at which you can be reached

Office Use _____	Business Office _____	ESL <input type="checkbox"/> No <input type="checkbox"/> Yes	Date Application Received _____
Application Fee _____	Math Placement _____	Starting Date _____	
Application Status	Accept	Reject	Wait List
	Other-See file	Director _____	Principal _____

**STUDENT HISTORY**

**A. NOTE:** *If complete and accurate information is not provided, your child's admission or placement will be subject to review and reevaluation. Please include dates and an explanation when answering the following questions:*

1. Has your child received any special academic or emotional support (i.e. speech, learning disabilities, resource room)\*?  
 \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_\_
2. Has your child ever been in an English as a Second Language (ESL) Program? \_\_\_\_ Yes\* \_\_\_\_ No \_\_\_\_\_
3. Has your child been evaluated by an educational psychologist or special education teacher? \_\_\_\_ Yes\* \_\_\_\_ No \_\_\_\_\_
4. Has your child ever been suspended or expelled? \_\_\_\_ Yes\* \_\_\_\_ No \_\_\_\_\_
5. Has your child ever repeated or skipped a grade? \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_\_
6. Does your child adjust to new situations easily? \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_\_
7. Special talents or hobbies: \_\_\_\_\_

**B. HEALTH PROBLEMS :** Are there any problems currently effecting your child? \_\_\_\_ Yes \_\_\_\_ No

If yes, please describe in detail when completing the HEALTH FORM.

**C. WILL THE STUDENT BE INVOLVED IN A HOMESTUDY PROGRAM FROM HIS/HER COUNTRY?** \_\_\_\_ Yes \_\_\_\_ No

If yes, please have official records or documents translated if not in English

**D. ANY OTHER COMMENTS TO ASSIST THE FACULTY:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**E. ACADEMIC HISTORY OF STUDENT**

Please account for all years your child has been in school beginning with the current year. Note that we require official academic records for the previous three years.

Name of School/ Address	City/ Country	Attended From To (m/yr) (m/yr)	Age	Grade/ Standard	Language of Instruction

**STUDENT LIVES WITH**

\_\_\_Father \_\_\_Mother \_\_\_Stepfather \_\_\_Stepmother \_\_\_Guardian

\_\_\_Father deceased      \_\_\_Parents divorced      \_\_\_Father remarried  
 \_\_\_Mother deceased      \_\_\_Parents separated      \_\_\_Mother remarried

Who has legal custody? \_\_\_\_\_

Full Name of Parent or Guardian/s Who Reside with Student: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

**SIBLING INFORMATION**

(List all siblings)

NAMES OF ALL SIBLINGS	AGE	SEX	APPLYING AT ISY?	ATTENDING ISY?	LIVES WITH FAMILY?
_____	_____	_____	___Yes ___No	___Yes ___No	___Yes ___No
_____	_____	_____	___Yes ___No	___Yes ___No	___Yes ___No
_____	_____	_____	___Yes ___No	___Yes ___No	___Yes ___No
_____	_____	_____	___Yes ___No	___Yes ___No	___Yes ___No

**EMERGENCY CONTACT IN YANGON**

(Other than parent/guardian)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Employer in Yangon: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

**ANTICIPATED LENGTH OF ENROLLMENT**

A. What is the anticipated length of time your child will be enrolled at ISY: \_\_\_\_\_

**CERTIFICATION**

We certify that the above information is complete and true. We authorize ISY to contact my child's previous schools to verify the facts. We understand that failure to provide accurate information may result in the rejection of this APPLICATION. It is also understood that if accepted to ISY, the student and family will comply with the rules and regulations as described in the STUDENT/PARENT HANDBOOK.

Parent/ Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_  
 month                  day                  year

Student Signature (Grade 6- 12) \_\_\_\_\_ Date: \_\_\_\_\_  
 month                  day                  year

**Office Notes:**

# ADMISSIONS PROCEDURE CHECKLIST

THIS CHECKLIST WILL ASSIST YOU IN COMPLETING THE APPLICATION PROCESS IN A TIMELY MANNER.

**1. Prior to acceptance at ISY, the applicant must submit the following to the school office:**

- \_\_\_a. **Official** copies of **academic records** from each school attended during the **past three years**, in English, except in Elementary grades when children have not attended school for three years.
  - \_\_\_b. Copies of any psychological, educational and/or suspension, expulsion reports
  - \_\_\_c. A completed **Application form**
  - \_\_\_d. A completed **Parent Consent to Release Records Form**
  - \_\_\_e. A completed **Drug Awareness Policy Letter** (for grade 6-12)
  - \_\_\_f. A completed **Health Form** (2 pages)
  - \_\_\_g. A copy of the **student's passport** showing
    - i) passport number      ii) place and date of issue
    - iii) picture              iv) date of birth
  - \_\_\_h. The **application fee of \$100** (U.S)
  - \_\_\_i. One passport-sized **photograph** of the student, with the student's name written on the back
2. Once all material is received, the division Principal will review the application and arrange any necessary evaluations. All students will need to take a math placement assessment and writing assessment. The division Principal will schedule an appointment for non-English and limited-English speaking students to take the English as a Second Language Testing (ESL).
3. Upon review of all materials, the family will be informed of the admission decision and the child's first day of attendance. Middle and High School students will meet with the Counselor to select courses prior to their first day of classes.

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BUSINESS MANAGER: [khin@isy.net.mm](mailto:khin@isy.net.mm)

## FEE STRUCTURE 2009-2010

Effective August, 2009 the following fee structure at International School Yangon applies:

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**Application Fee**     A fee of \$100 is due upon submission of each student's application. This sum is applicable toward the tuition payment but is not refundable if the child does not attend ISY.

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**Registration Fee**     A one-time registration fee of \$1,000 is levied for all Kindergarten through grade twelve students. (\*\*)

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<b>Tuition Fees</b>	Pre-Kindergarten.....	US\$ <u>3,570.00</u> per semester.
	Kindergarten.....	US\$ <u>5,703.00</u> per semester.
	Grade 1 to Grade 5.....	US\$ <u>5,703.00</u> per semester.
	*** Grade 6 to Grade 8 .....	US\$ <u>6,164.00</u> per semester.
	*** High School-Grade 9 to Grade 12 .....	US\$ <u>6,276.00</u> per semester.

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**Capital Fees:**     Kindergarten and grade one to twelve students are assessed a one-time capital fee of \$4,000. (\*\*)

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**ESL Fees:**     Students who are placed in the ESL program will be assessed a \$830 fee per year for the time they receive ESL service.

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### Payment of Fees

Tuition fees are payable on a semester basis. Any student whose bill is in arrears for more than one month will be suspended until the payment is made. School records are released only after all outstanding fees have been paid.

The school year is divided into two semesters, each of which includes two terms. Students who attend ISY for any or all of a school quarter are charged tuition fees for the full term. Charges are not levied on a per diem basis.

\* All fees are quoted in U.S. dollars.

\*\*The Registration Fee (\$1,000.00) and the Capital Fees (\$4,000.00) are to be paid before the students' first day in attendance.

\*\*\* Grade 6-12 tuition fees include Field Study Fees.

# International School Yangon



## ADMISSION REQUIREMENTS AND STUDENT PLACEMENT

The International School Yangon's academic programs are modeled on the curricula and practices of outstanding public and private schools in the United States and, particularly in the high school, are primarily designed to prepare students for admission to university. Where appropriate, these programs specifically recognize the international nature of the student body and are designed to encourage the student's appreciation of other cultures and nations. The medium of instruction is English and ISY awards an American diploma.

### STUDENT ADMISSIONS

#### **A. POLICY FOR ADMISSIONS AND/OR EXCLUSIONS**

The school makes every effort to accept all qualified students who seek admission. The Board of Management reserves the right to limit enrollment as well as exclude students at any time. Exclusion of students may occur before students enroll or at any time after enrollment. **Application is not a guarantee of admission.**

The following guidelines for exclusion of students include:

1. Students who require a significant modification of ISY's instructional program.
2. Students who have educational handicaps that require services not provided by ISY.
3. Students who are not benefiting from the academic program due to lack of interest or effort, persistent behavior problems, or failure to maintain a satisfactory grade average.
4. Students who do not adhere to the policies, rules, and regulations as described in the STUDENT/PARENT HANDBOOK.

#### **B. STUDENT RECORDS AND EVALUATIONS**

Student records are essential in the enrollment process. These records must be official copies of academic records from each school attended during the past three years. When the records are not in English, ISY will need a copy of the original documents in addition to a notarized translation. We also ask for an explanation of the grading system and, when possible, the student's rank in class. A student will not be considered for admission until official school records are submitted.

Full and accurate information about your child/children is important for the admissions staff to properly assess ISY's ability to provide an appropriate educational program. Please note that the withholding of information will delay the admissions process and can result in a later reversal of acceptance. When there is a question about a student's ability to function at ISY, the division Principal will review the student's file and may require that Placement Evaluation be taken in English and/or mathematics.

After all required registration materials have been submitted to the school and it is determined that the child/children meets the school's entrance criteria, the appropriate grade placement will be established. You will be informed of your child/children's acceptance into ISY. Families not in Yangon should call for an appointment once they have arrived. Each student must be accompanied to this meeting by at least one parent or guardian. Questions about the school's curriculum, credit transfer and other specific issues related to ISY's academic program will be answered at this meeting.

#### **C. SPECIAL NEEDS STUDENTS**

Limited accommodations are available within the regular classroom for students with mild learning disabilities. The present facility is not accessible for individuals with physical handicaps.

#### **D. STUDENTS OF LIMITED ENGLISH ABILITY – ESL**

Students who are not native speakers will take the Placement Evaluation to determine their English proficiency level. Their academic records will also be evaluated. A limited number of ESL classes are available for students with little or no English. The program is time-limited providing only temporary support before the student is expected to participate fully in the mainstream classes. There is an additional fee of \$415.00 is assessed for ESL students. Students with limited English proficiency are not guaranteed admission to ISY. Please refer to the Student/Parent Handbook for an explanation of the program.

## **INITIAL PLACEMENT**

The International School of Yangon reserves the right, through the division Principals, to determine the proper placement of new students. Testing and other appropriate means are often used to ensure that students are placed properly.

Students are placed in the grade which follows next in sequence from their previous schooling. However, students enter ISY from many different countries with widely differing educational systems. Students who enter from American curriculum schools are placed with their age group, provided they have successfully completed the appropriate number of years in school. The American pattern of education calls for one year of Kindergarten (at age 5) and a total of 12 years of elementary (grades 1-5), middle (grades 6-8) and secondary (grades 9-12).

**From U.S. Systems:** Students coming from other American-based programs will be placed according to their previous school's recommendation. Student age, as compared to the cut-off date at ISY (see Handbook), will be examined if the administration suspects that placement problems may arise from following a previous school's recommendation. On occasion, evaluations will be conducted if student records create a concern.

**From Other National Systems:** Many of the national education programs in other countries often correspond to the American grade level system. An explanation of the number of hours per class per year is needed to determine transfer credit. Also needed is an explanation of the sending school's grading system. Any concerns by parents are examined individually, but the main criteria for student placement will be according to the ISY cut-off age policy for all grade levels unless academic history and/or testing indicate concerns regarding student achievement or ability.

**From Differing School Calendars:** The ISY calendar begins in August and ends in May or June. A student who comes to ISY from systems with a different school year calendar, may be placed in the grade the child has already completed in his/her prior school. This means that in some cases students will repeat part of an academic year.

**High School Students:** High School grade classification will be based on number of years completed, number of credits earned, and time of year of arrival. Grade placement for ESL students is determined also by English proficiency.

## **OTHER IMPORTANT INFORMATION**

**Home Study Program:** Parents are encouraged not to have their child participate in a home study program for their native country's national examination. ISY's curriculum is very demanding. We have found that home study programs place great stress and pressure on children, particularly ESL students. We believe all children need time to develop their physical and social skills as well as relax.

**Homework and Grading:** Homework is given on a regular, if not daily, basis. It is a critical component of the learning process. It is practice and reinforcement for skills presented in the classroom. Parents are encouraged to review homework with their child. Report cards are given four times per year. Final grades for grades 9-12 are the average of the appropriate marking periods and semester examinations.

**Transferring to other schools:** ISY's transcript is accepted by other American international schools. Families returning to their native country prior to graduation need to explore the ease of transferring to their country's schools. Also, if your child wishes to attend a non-American university, you must carefully investigate whether an American diploma is acceptable for admission.

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## PARENT CONSENT TO RELEASE RECORDS

In order to properly place and educate students, ISY requires academic records for the previous three academic years. If your child has received any special services, these records may be contained in confidential files which we are also requesting. We ask that your child's current school prepare as complete a record as possible for your child.

.....  
To the School Registrar:

.....  
\_\_\_\_\_ (student) has applied for admission to International School Yangon.

Please mail to the Guidance Counselor the following:

- Official transcripts of all grades including grades at time of withdrawal.
- Standardized achievement, intelligence and aptitude test scores.
- Teacher and or Counselor observations and comments.
- Records of cocurricular activities.
- Results of any special academic or psychological evaluations.
- Information on any special support (academic, learning disabilities, speech, emotional etc.) that the student has received.
- Expulsion records.

Kindly send all correspondence via airmail or by fax.  
.....

## PARENT CONSENT TO RELEASE RECORDS

I hereby give my consent for \_\_\_\_\_  
(school from which student is coming)

to release at school records on my son/daughter, \_\_\_\_\_  
(student)

Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_  
                  mo                  day                  yr

\_\_\_\_\_  
(parent's signature)                      (parent's name)                      \_\_\_\_\_  
(date)

School name and address in full: \_\_\_\_\_  
(school from which student is coming) \_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_

Fax No: \_\_\_\_\_

Phone No: \_\_\_\_\_

Note to Parents: All records must be translated, notarized, and sent with original copies.

# International School Yangon



## Health/ Security Action Form

Date: \_\_\_\_\_

Student's name: \_\_\_\_\_

Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Birthdate (mo/day/yr): \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye color: \_\_\_\_\_ Hair color: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Father's name: \_\_\_\_\_ Mother's name: \_\_\_\_\_

Father's Office Number \_\_\_\_\_ Mother's office Number: \_\_\_\_\_

Guardian's name and office number: \_\_\_\_\_

Family doctor: \_\_\_\_\_ Phone number: \_\_\_\_\_

Emergency contact (name): \_\_\_\_\_ Phone number: \_\_\_\_\_

<i>IMMUNIZATION HISTORY</i>	<i>DATE OF LAST IMMUNIZATION</i>
1. Tetanus/ Diphtheria/ Whooping Cough (DPT)	
2. Polio	
3. Measles	
4. Mumps	
5. Rubella	
6. Hepatitis B	
7. Hepatitis A	
8. Typhoid	

1. Current health issues: \_\_\_\_\_

2. Current Medication

<i>NAME</i>	<i>WHEN TAKEN</i>	<i>DOSAGE</i>	<i>REASON TAKEN</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Any physical activity restrictions\* \_\_\_\_\_

\*Doctor letter is requested.

**HEALTH HISTORY:** Please indicate whether your child has/had the following

MEDICAL HISTORY	YES	NO	DATE	INDICATIONS/ REASONS
Convulsions/ Fits				
Epilepsy				
Asthma				
Allergies (specify)				
Eyes/ Vision problem				
Ears/ Hearing problem				
Endocrine disorder (Diabetes)				
Heart problem				
Measles				
Mumps				
Tuberculosis				
Hepatitis				
Dengue Fever				
Whooping Cough				
Rheumatic fever				

Current illness or medical concerns:

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The International School Yangon has a Board of Management approved "security action plan" for dealing with the safety of its students and staff. Should an emergency arise, the school's first priority will be to expose students and staff to the least amount of danger. There are several options that the school can follow in implementing its security action plan. Upon request this plan will be provided to interested parents. In brief, the plan provides parameters for notifying parents when an emergency deems it necessary to close the school, institute early pick-up of students, keep students at school beyond the regular dismissal time or remove students from the campus during the school hours.

I hereby give ISY permission for the following:

1. To secure emergency medical assistance for my child in the event that we (parents, guardian), my doctor or my emergency contact cannot be contacted.
2. To receive non-prescription medication for my child from a school official.
3. To execute its security action plan as best it sees fit to protect the well-being of my child.

I verify that all information given is true and correct

Signature of parent/ guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Note: In order to accurately maintain these records, parents are requested to notify the school of all changes or any additional information.