



## 入宿表格 Hostel Registration Form

(A) 类别 Category		
<input type="checkbox"/> 新生 New student	<input type="checkbox"/> 插班生 Transferred student	<input type="checkbox"/> 旧生 Existing student

年份 Year

(B) 国籍 Nationality
<input type="checkbox"/> 本国学生 Local student <input type="checkbox"/> 国际学生 International student : _____



(C) 学生资料 Student's Particulars
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请以正楷/英文大写字母填写 Please write in CAPITAL LETTERS

姓名 Name			
中文姓名 Chinese Name		年龄 Age	
性别 Gender	<input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female	出生地点 Place of Birth	
身份证号码 NRIC No.		出生日期 Date of Birth	<div style="border-bottom: 1px solid black; width: 100%; display: flex; justify-content: space-around;"> <span>日 day</span> <span>月 month</span> <span>年 year</span> </div>
*护照号码 Passport No.		出生证明号码 B/C No.	
联系电话号码 Contact No.		电邮 Email Address	
地址 Address			
种族 Race	<input type="checkbox"/> 华裔 Chinese <input type="checkbox"/> 巫裔 Malay <input type="checkbox"/> 印裔 Indian <input type="checkbox"/> 其他 Others: _____		
宗教 Religion	<input type="checkbox"/> 佛教徒 Buddhist <input type="checkbox"/> 回教徒 Muslim <input type="checkbox"/> 兴都教徒 Hindu <input type="checkbox"/> 基督教徒 Christian <input type="checkbox"/> 其他 Others: _____		

\* 国际生填写而以 To be filled up by International Student only

(D) 学生健康状况 Student's Health Condition
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健康状况良好? Good health condition?	<input type="checkbox"/> 是 Yes <input type="checkbox"/> 否 No : _____
其他疾病史 Other medical problem	<input type="checkbox"/> 无 None <input type="checkbox"/> 有 Yes (请注明 Please indicate) <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <input type="checkbox"/> 心脏病 Heart Disease  <input type="checkbox"/> 高血压 Hypertension  <input type="checkbox"/> 药物敏感 Allergy to medicine  <input type="checkbox"/> 气喘 Asthma  <input type="checkbox"/> 其他 Others : _____         </div> <div> <input type="checkbox"/> 精神疾病 Mental illness  <input type="checkbox"/> 糖尿病 Diabetes  <input type="checkbox"/> 皮肤敏感 Skin disease  <input type="checkbox"/> 癫痫 Epilepsy         </div> </div>
请注明其他事项 (如有) Other remarks (If any)	
医药卡 Medical card	<input type="checkbox"/> 无 None <input type="checkbox"/> 有 Yes (请注明 Please indicate) a) 保险公司 Insurance co. : _____ b) 医药卡号码 Card no. : _____
若需要急诊或发生意外, 有无指定医院及医生 In case of any emergency, is there any appointed hospital or doctor?	<input type="checkbox"/> 有 Yes (请注明 Please indicate) a) 医院 Hospital : _____ b) 医生 Doctor : _____  <input type="checkbox"/> 无 None 注意: *若您勾选“无”, 意味同意校方先将学生送往附近诊所或医院。以下是诊所或医院的资料: * If it is not stated, students will be sent to a nearby clinic or hospital stated below in case of an emergency / sickness.  A. Klinik Alpha     05-321 5512 (Aeon 附近 near Aeon) B. Klinik Medijaya     05-3235808 (Tesco 后面 behind Tesco) C. General Hospital Ipoh 怡保中央医院 05-2085000



(E) 家长/监护人资料 Parents' / Guardian's Particulars

父亲 Father

姓名 Name																									
中文姓名 Chinese Name													职业 Occupation												
身份证号码 NRIC No.													电邮 Email Address												
护照号码 Passport No.													签名样本 Signature verification												
住家电话 House Tel. No.																									
手机电话 Mobile No.																									
办公室电话 Office Tel. No.																									
住址 Home Address																									
通讯地址 Correspondence Address	<input type="checkbox"/> 同上 Same as above (若通讯地址不同, 请填写这栏 Kindly fill up this column if different with home address)																								

母亲 Mother

姓名 Name																									
中文姓名 Chinese Name													职业 Occupation												
身份证号码 NRIC No.													电邮 Email Address												
护照号码 Passport No.													签名样本 Signature verification												
住家电话 House Tel. No.																									
手机电话 Mobile No.																									
办公室电话 Office Tel. No.																									
住址 Home Address																									
通讯地址 Correspondence Address	<input type="checkbox"/> 同上 Same as above (若通讯地址不同, 请填写这栏 Kindly fill up this column if different with home address)																								

监护人 Guardian

姓名 Name																									
中文姓名 Chinese Name													职业 Occupation												
身份证号码 NRIC No.													电邮 Email Address												
护照号码 Passport No.													签名样本 Signature verification												
住家电话 House Tel. No.																									
手机电话 Mobile No.																									
办公室电话 Office Tel. No.																									
关系 Relationship																									
住址 Home Address																									
通讯地址 Correspondence Address	<input type="checkbox"/> 同上 Same as above (若通讯地址不同, 请填写这栏 Kindly fill up this column if different with home address)																								



**(F) 同意书 Acknowledgement**

1	<p>本人授权及委托舍监为小儿 / 小女处理寄宿期间所发生的事项, 如外出参加课外活动及紧急时由舍监代表本人签住院手续及施手术同意书等。如有发生意外事件, 本人将不追究校方或舍监之责任。</p> <p>I hereby agreed and understand that the hostel warden is act on my behalf if any parental consent and signature is needed such as allowing my child to participate in school activities, admitting to hospital or permission for surgery in case of emergency etc. I will bear the responsibility for any unwanted incident.</p> <p><b>备注 Remarks:</b> 指定医院名称请参阅 (D) <i>For appointed hospital, please refer to Section (D)</i></p>
2	<p>本人已详阅学校之宿舍管理条规, 并保证子女住校期间将遵守宿舍一切规定及接受师长之指导, 如有违规, 愿依校规处置。</p> <p>I have read and agreed the Hostel Rules and Regulations as laid down by the school authority and I will ensure that my son / daughter will obey these rules and follow teachers' guidance. I understand and I am willing to accept any disciplinary action imposed to my child who breaks the school rules and regulations.</p>
<p><b>寄宿生回家条规 (回家 - 周末、假期或其他事故)</b> <b>Permission to leave Hostel (Going home - weekends / vacation or other matters)</b></p>	
3	<p>所有寄宿新生及插班生皆不被允许自行回家。 All new hostelites will be allowed to go home only when they are accompanied by the parents / guardians.</p> <p>住宿第二年起, 只有完成完整的申请手续, 才可以自行回家。 The hostelites will be allowed to go home on their own once they are in the second year with complete application procedures.</p> <p><b>* 若寄宿生的父母已离异, 请填写以下部分: -</b> <b>Kindly put a tick (✓) if applicable for parents who are separated / divorced:-</b></p> <p><input type="checkbox"/> 本人拥有子女的法定监护权, 并允许子女的父亲/母亲不需本人允许, 可自行到校接送子女。 I have the legal custody of my child, but, I allow my child's father / mother fetch my child without my permission.</p> <p><input type="checkbox"/> 本人拥有子女的法定监护权, 除非得到本人的允许, 否则子女的父亲/母亲不可自行到校接送子女。 I have the legal custody of my child, and, my child's father / mother is only allowed to fetch my child with my permission.</p>
<p><b>寄宿生外出条规 (申请外出 - 周末或假日)</b> <b>Permission to leave Hostel (Going out - school weekends or holidays)</b></p>	
4	<p>所有寄宿新生及插班生皆不被允许自行外出。 All new hostelites will be allowed to go out only when they are accompanied by the parents / guardians.</p> <p>只有凭家长/监护人的信息, 寄宿生才被允许外出。 The hostelites will be allowed to go out with parents / guardians' approval (text message).</p>

**(G) 声明 Declaration**

<p>以上乃据实填报之资料, 如日后发现有任何虚构之资料, 本人愿意承担一切后果行为。</p> <p>I verify that the above information is correct to the best of my knowledge. I accept under the condition of providing false information deliberately could result in dismissal of my child from the Hostel.</p>	<table border="1" style="width: 100%;"> <tr> <th colspan="2" style="background-color: #cccccc;">签名 Signature</th> </tr> <tr> <td style="height: 50px;"></td> <td></td> </tr> <tr> <td style="font-size: small;">姓名 Name</td> <td></td> </tr> <tr> <td style="font-size: small;">身份证/护照号码 NRIC/Passport no.</td> <td></td> </tr> <tr> <td style="font-size: small;">日期 Date</td> <td></td> </tr> </table>	签名 Signature				姓名 Name		身份证/护照号码 NRIC/Passport no.		日期 Date	
签名 Signature											
姓名 Name											
身份证/护照号码 NRIC/Passport no.											
日期 Date											



学校记录 Office Record

入宿日期 Admission Date		房间编号 Room No.	
备注 Remark			
<b>请确保以下文件副本已附上</b> Please ensure the following documents copies are attached		<b>备注</b> Remark	
<input type="checkbox"/>	学生身份证 (本地生) / 护照 (国际生) Student's NRIC (Local) / Passport (International)		
<input type="checkbox"/>	父亲身份证 (本地生) / 护照 (国际生) Father's NRIC (Local) / Passport (International)		
<input type="checkbox"/>	母亲身份证 (本地生) / 护照 (国际生) Mother's NRIC (Local) / Passport (International)		
<input type="checkbox"/>	监护人身份证 (本地生) / 护照 (国际生) Guardian's NRIC (Local) / Passport (International)		
<input type="checkbox"/>	学生近照 (4 张) Student's recent photos (4 copies)		
<input type="checkbox"/>	学生医药卡 (若有) Student's Medical Card (If any)		
<b>分派以下的卡给寄宿生 Allocation of below cards to hostelite</b>			
<input type="checkbox"/>	外出卡 Outing Card	<input type="checkbox"/>	回家卡 Home Return Card
姓名 Name		签名 Signature	
日期 Date			