

PHOTO

****Please attach a photocopy of the child's Birth Certificate and Passport Size Photo**

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Data Conversion / Maintenances Form - Parent's Information

Mother's Particulars

Name* (As in IC)			
I/C No. (New)*		-	
I/C No. (Old)			
Tin No.*			
Passport No			
Home Address*			
Telephone No. (Home)			
Handphone No.*			
Email*			
Occupation			
Company Name			
Company Address			
Telephone (Office)			
Race		Religion	
Status (married)		Nationality	

Father's Particulars / Guardian

Name* (As in IC)			
I/C No. (New)*		-	
I/C No. (Old)			
Tin No.*			
Passport No			
Home Address*			
Telephone No. (Home)			
Handphone No.*			
Email*			
Occupation			
Company Name			
Company Address			
Telephone (Office)			
Race		Religion	
Status (married)		Nationality	

1. Emergency Contact (Relative or Friend)

Name: _____

Address (Home): _____

2. Telephone Contact: _____ (H) _____ (O) _____ (H/P)

3. Doctor or Clinic to refer for my child: _____ Tel.: _____

4. Does your child have any medical problems or allergies?

5. Previous school / kindergarten attended _____ Year _____ Level _____

DECLARATION

I, _____ (I/C No.: _____)
hereby accept and declare that I shall not in any whatsoever, hold Tadika Sri Mawar (Herein after referred to as "the school") responsible for any misbehavior, misdeeds or injuries which may incurred on behalf of my son / daughter _____ whether within the vicinity of the school or other wise and shall demand indemnity from the school against all claims that may arise from any misdeeds or injuries cause or to be caused by my son / daughter to any child in the school.

I, _____ (I/C No.: _____)
agree to pay the RM600.00 refundable deposit on entrance to the school and fees of RM1,320.00 per term for my son / daughter. I am aware and also undertake to pay half the first term fees of the following year to ensure that there is a place for my child. I am aware that fees paid are non-refundable and guarantee to make my payment regularly and promptly.

I, _____ (I/C No.: _____)
hereby undertake to pay all fees promptly when due, failing which I understand that the school authorities have the right to:-

- (1) suspend my child from attending classes should the fees remain unpaid,
- (2) impose a late payment charge on outstanding fees, and
- (3) I further confirm that I also am duty and irrevocably authorized by the child's other parent / guardian Mr. / Miss / Mrs. _____ to sign this undertaking on his / her behalf.

Parent's Signature

Name

Date

TADIKA SRI MAWAR



Name of Student : _____

Born in Year : _____ (Level 1 / 2 / 3)

QUESTIONNAIRES

We would appreciate your feedback to assist us in helping your child with his/her learning at our school.

1. Characteristic of my child. Please tick (✓)

☐	Shy
☐	Quiet
☐	Talkative
☐	Can speak English well
☐	Can writes
☐	Enjoys reading
☐	Active child
☐	Playful
☐	Stubborn

☐	Does work independently
☐	Short attention span
☐	Listen to stories without interrupting
☐	Makes friends easily
☐	Organised with his / her work
☐	Eats on his / her own
☐	Able to dress herself / himself
☐	Responsible with own belongings
☐	Aware of danger

Others: Please state: _____

2. Health

Allergy and Health conditions if any, please state: (Asthma/ Eczema/Heart problem/Autism)

Parent's Signature : _____ Date: _____

Parent's Name : _____