



# APPLICATION FORM

**PLEASE COMPLETE THE APPLICATION FORM  
AND SUBMIT ALL OF THE REQUIRED DOCUMENTS LISTED  
BELOW TO REGISTER YOUR CHILD. APPLICATIONS WILL NOT BE PROCESSED  
UNTIL ALL DOCUMENTS AND THE APPLICATION FEE HAVE BEEN RECEIVED.**

## LIST OF REQUIRED DOCUMENTS TO APPLY

- Completed and signed application form
- Copy of payment of application fee of THB5,000
- Copy of child's birth certificate
- Copy of child's passport(s)
- Copy of child's ID card (if applicable)
- Copy of each parent's / guardian's ID card (for Thai citizens)
- Copy of each parent's / guardian's passport and residence visa (for non-Thai citizens)
- Child's most recent school report for one academic year
- Any other relevant documents relating to specific needs or requirements for the child

## ADDITIONAL REQUIRED DOCUMENTS TO COMPLETE ENROLMENT

- Clear digital portrait photo of each parent / guardian who is allowed to pick up the child
- Copy of ID card/passport of each guardian who is allowed to pick up the child
- Copy of a car licence number to receive a car sticker (Up to 4)
- Up-to-date health and immunisation records

## WHAT MADE YOU APPLY FOR YOUR CHILD TO COME TO DBS (YOU CAN CHOOSE MORE THAN ONE RESPONSE)?

- Advertisement
- Billboard
- Booth
- Current Denla students/Alumni
- Curriculum
- DBS Facebook/Instagram
- DBS Website
- Facilities
- Location
- Referral by a DBS parent
- Referral by others
- Other

## CHILD'S DETAILS

Family name:  นามสกุล:   
First name:  ชื่อ:   
Preferred name:  ชื่อเล่น:   
Date of birth (DD/MM/YY):  Gender:  Male  Female  
Nationality:  Religion:   
Year group applied for:  Academic Year:  Starting date:   
Name and location of current school:   
Curriculum followed:  Current year group:

Please indicate if your child previously attended:

Denla Phetkasem  Denla Rama 5 or  Not Denla alumni

Do you have a child currently attending, or applying to, DBS:  Yes  No

Does your child have any medical conditions or allergies?  Yes  No

(If so, please give detail)

## LEARNING DIFFERENCES

**Physical** including visual / hearing / speech / mobility  Yes  No

**Behaviour** Has your child ever received support for behaviour?  
including eating or sleeping, anxiety, depression  Yes  No

### Challenges in learning

- Dyslexia / dysgraphia (reading and writing)  Yes  No
- Dyscalculia (maths)  Yes  No
- Dyspraxia (fine and gross motor skill issues)  Yes  No
- Attention deficit disorder including ADD or ADHD (concentration)  Yes  No
- Asperger's / Autism (emotional and social behaviour)  Yes  No
- Other e.g. speech / language  Yes  No

For any 'yes' answers please give details here including any medication currently being taken

## PERMISSION FOR INFORMATION EXCHANGE:

In order to facilitate the admissions process, we kindly request your permission for us to send a new student reference form and a safeguarding and child protection request for information to your child's previous school. Your consent for this information exchange is an essential part of our admissions procedure.

[ ] I allow the school to send a new student reference form and safeguarding request to my child's previous school.

[ ] I do not allow the school to send any information requests.

Please provide reason(s)

*Please be aware that not granting permission might affect your child's enrolment process.*

**PARENT/GUARDIAN DETAILS**

	Father's details	Mother's details
Name-Surname		
Nationality		
Language(s) speaking		
Mobile number		
Email address		
Marital status:	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Other <input style="width: 150px;" type="text"/>	
	<i>Please note that if parents are not living together, please attach copies of any legal documents relating to the care of this child.</i>	
Home address:		<input type="checkbox"/> Same as the father's address
No.		
Village		
Road		
Sub-district		
District		
Province		
Postcode		
Occupation:		
Job title		
Company name		
Business type		
Partnership: Please indicate the offer(s) you can help with our students' work experience		
Internship in my company.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
A meeting to discuss my work.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am willing to volunteer as a guest speaker in order to share my work experience with students.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Main contact person for school correspondence:  Father  Mother  Both  Other

If other, please specify: (please provide a copy of ID card/passport)

Name and Surname:  Relationship:

Email address:  Mobile number:

#### PAYMENT DETAILS

Responsibility for school fees:  Parents \_\_\_\_\_ %  Company \_\_\_\_\_ %

Schedule of fee payments:  Annually  Termly

If Company is responsible for the payment, please provide the following information:

Company/Organisation Name:

Contact person:

Address:

Telephone number:

Email:

#### NOTE:

Early application is recommended. A non-returnable application fee of THB5,000 is payable with this application. Applications will be considered in the order they are received. Offers of places are subject to availability and the admission requirements of the school at the time offers are made. A copy of the current DBS Admissions Policy, DBS Terms and Conditions and DBS Fees, Additional Charges and Refunds Policy are available on the school's website.

#### DECLARATION:

- I/We understand that the school may obtain, process and hold personal information about my/our child, including sensitive information such as medical details, and I/we consent to this for the purposes of assessment and, if a place is later ordered, in order to safeguard and promote the welfare of the child.
- I/We understand all information declared on this form is accurate. The school reserves the right to withdraw any offer of a place if any of the above information is inaccurate or if it is found that information on significant behavioural or learning needs has been withheld from the school.
- I understand and agree to the Terms and Conditions of the deposit will be given unless one full term's notice is submitted in writing, if my child leaves the school.

#### SIGNATURE OF PARENT(S)

	First parent	Second parent
Signature:	<input type="text"/>	<input type="text"/>
Name in full:	<input type="text"/>	<input type="text"/>
Relationship to the child:	<input type="text"/>	<input type="text"/>
Date:	<input type="text"/>	<input type="text"/>