



American International School

Please list all schools attended (most recent school first)

School	Address	Telephone	Dates Attended	Grade Levels

Health (Please include any illness, allergy, medication, or ongoing medical concerns of which the school should be aware.)

May the student participate in all school sports/activities? If not, please explain.

Please list previous interest or achievement in sports:

Please list hobbies, musical abilities, or other interests:

Has the student previously received help or attention because of learning problems or disabilities? (Please attach any relevant information.)





FAMILY INFORMATION

Names of Brothers or Sisters	Sex	Age	Date of Birth (mm/dd/yy)	Present Grade and School	Applying to AIS?

Family: Residential Address _____

Home Telephone _____ Home Fax _____

Email Address _____

Denomination/Religion _____ Parents' Marital Status _____

Father: Name _____ Nationality _____

Occupation _____

Business Name/Address _____

Office Phone _____ Office Fax _____ Cell Phone _____

Mother: Name _____ Nationality _____

Occupation _____

Business Name/Address _____

Office Phone _____ Office Fax _____ Cell Phone _____

Predicted length of stay in Accra: _____





**American
International
School**

Emergency Contact Information

(Please designate someone AIS can contact in an emergency if parents/guardians are not available)

Name _____ Relationship _____

Address _____ Telephone _____

For Students Planning to Live with Guardians:

Do you need help finding housing for your child? Yes/No If Yes, please indicate preference:
Homestay/Private Hostel

AIS parents who are not themselves living in Accra and must designate a responsible Accra resident whom the school can contact if necessary.

Name of Guardian in Accra _____

Address _____

_____ Telephone _____

Email _____

Billing Information

School fees will be paid by _____

Billing Contact Address _____

Billing Telephone _____ Billing Fax _____

Please list below any other comments or pertinent information regarding this application:





American International School

We declare that the information on this application is true and correct.

Father's Signature _____

Date _____

Mother's Signature _____

Date _____

Guardian's Signature (if applicable) _____

Date _____

FOR SCHOOL USE ONLY

Date Received: _____

Admitted to Grade _____

Interviewed by _____

Date Admitted _____

Decision/Recommendation _____

Date to Begin _____

Records Received _____

Registration Deposit Paid _____

Tuition Level _____

