

**REFERRAL (推荐者)**

NAME (姓名): \_\_\_\_\_

 MHCS Parent (本校家长)

Name of Child: \_\_\_\_\_

 MHCS Personnel (本校教职员) Outsider (其他) CONTACT # (联系号码): \_\_\_\_\_

ADDRESS (地址): \_\_\_\_\_

EMAIL (邮箱): \_\_\_\_\_

Relation to the applicant (关系): \_\_\_\_\_

**For NON-REFERRALS (非推荐者),**

How did you first learn about MHCS? (从何处认识到学校?)

Tick only ONE (请只勾一个)

 Family/ Friends (家人、朋友)  MHCS Website (学校网站) Walk-in (路入)  Social Media (社交媒体) (Facebook) Print Ads (传单)  Others (其他): \_\_\_\_\_**MAKATI HOPE CHRISTIAN SCHOOL**

HARMONY \* EXCELLENCE \* INTEGRITY \* RESILIENCE \* STEWARDSHIP

Makati Campus: 2312 Don Chino Roces Avenue Extension, Magallanes, Makati City

Tel. No. 8817-1111 loc. 102/117/206 CP#. 0917-838-7169

Email: registrar@makatihope.edu.ph Website: www.makatihope.edu.ph

Ortigas Campus: St. Francis Square (behind SM Megamall) Ortigas Center, Mandaluyong City

Tel. No. 8632-1010 loc. 151

**(申请表) APPLICATION FORM**

The applicant intends to enroll for (学年)

SY 20\_\_\_\_ - 20\_\_\_\_

 Preschool (幼儿园) \_\_\_\_\_ Elementary (小学) \_\_\_\_\_ High School (中学) \_\_\_\_\_Two (2) recent  
passport-sized  
photos of  
applicant

两张 护照照片

**NOTE:**

- This form should be accomplished completely by the parents/guardian of the applicant. Incomplete forms will not be processed. Please type or print legibly all information requested.
- All information will be kept confidential. Misrepresentation will be considered as a reason for non-acceptance.

Learner Reference Number (LRN) (from Gr. 1-Gr.12): \_\_\_\_\_

**PERSONAL DATA**

LEGAL NAME: \_\_\_\_\_

LAST (姓)

FIRST (名)

MIDDLE

NICKNAME (别名)

CHINESE (中文名)

Home Address 1: (地址 1): \_\_\_\_\_

No. (门号) Street (街名) Village/Subdivision (小区) Barangay City/Province (市、省)

Home Address 2: (地址 2): \_\_\_\_\_

No. (门号) Street (街名) Village/Subdivision (小区) Barangay City/Province (市、省)

Age (年龄) \_\_\_\_ Birthday (生日) \_\_\_\_/\_\_\_\_/\_\_\_\_ Birthplace (出生地) \_\_\_\_ Gender (性别) \_\_\_\_ Citizenship (国籍) \_\_\_\_

M/ D/ Y

Religion (信仰) \_\_\_\_\_ Mobile Phone No(s) (手机号码) \_\_\_\_\_ Telephone No(s) (电话号码) \_\_\_\_\_

Passport No (护照号码): \_\_\_\_\_ VISA Type/Status (签证类型): \_\_\_\_\_ ACR/I-Card # (移民局 I-卡号码): \_\_\_\_\_

**School Last Attended (前学校)**

Preschool (幼儿园): \_\_\_\_\_ SY Attended (学年) \_\_\_\_\_

Grade School (小学): \_\_\_\_\_ SY Attended (学年) \_\_\_\_\_

High School (中学): \_\_\_\_\_ SY Attended (学年) \_\_\_\_\_

**FAMILY BACKGROUND**

	FATHER (父亲)	MOTHER (母亲)
Legal Name (Last 姓, First 名, Middle)		
Birthday (生日)		
Birthplace (出生地)		
Citizenship (国籍)		
Home Address (家庭地址)		
Mobile Number (手机号码)		
Landline No. (电话号码)		
E-mail Address (邮箱)		
Language/Dialect Spoken (语言)		
Name of Company/Employer (公司名号)		
Position (职位)		
No. of Years Employed (工作年份)		
Business /Office Address (地址)		
Office phone # (办公室电话号码)		
Religion (信仰)		
Church Attended (教会)		
Highest Educational Attainment (最高学历)	<input type="checkbox"/> Secondary (中学) _____ <input type="checkbox"/> Tertiary/Course (大学) _____ <input type="checkbox"/> Post Grad - <input type="checkbox"/> MA (硕士) _____ <input type="checkbox"/> PhD (博士) _____ <input type="checkbox"/> Others (其他): _____ Last School Attended (最后学校就读) _____	<input type="checkbox"/> Secondary (中学) _____ <input type="checkbox"/> Tertiary/Course (大学) _____ <input type="checkbox"/> Post Grad - <input type="checkbox"/> MA (硕士) _____ <input type="checkbox"/> PhD (博士) _____ <input type="checkbox"/> Others (其他): _____ Last School Attended (最后学校就读) _____

APPLICANT'S BROTHER(S) / SISTER (S) STILL IN SCHOOL (eldest first) (其他兄弟姐妹在校就读)			
Name (姓名)	Age (年龄)	Level (年级)	School (学校)

Language Spoken at home (母语):  Filipino (菲语)  English (英语)  
 Chinese  Mandarin (普通话)  Hokkien(闽南语)  Others (其他) \_\_\_\_\_

Honors/Awards for Academic Excellence in School or at special events/distinctions received/special talents and skills 荣誉/学术卓越奖、特殊才能和技能奖	
Memberships in on/off campus / community organizations 校内/社区组织的会员资格	

**ADDITIONAL APPLICATION QUESTIONS**

Is applicant living with parents (申请人与父母同住吗)?  
 Yes (是)  With Guardian (跟监护人) Guardian's Name (监护人姓名) \_\_\_\_\_  
 Address (地址): \_\_\_\_\_

Is the applicant's father or mother an employee of MHCS(申请人家长是否本校教职员)?  Yes (是)  No (否)  
 If YES, who (如是, 谁)?  Father (父亲)  Mother (母亲)  Both (父母亲)  
 Check classification of specified parent (在哪一个部门工作):  
 Administrator (行政)  Faculty (教员)  Service Personnel (职员)  
 Others (其他) \_\_\_\_\_

Is this the first time the applicant has applied at MHCS (申请人是否第一次到本校申请)?  Yes (是)  No (否)  
 If NO (如不是), when (何时) (month & year) (年月) \_\_\_\_\_  
 Please indicate your previous application status (请指出您之前的申请状态):  Accepted (接受)  Not Accepted (不接受)  Waitlisted (等候单)  
 Others (其他) (pls. specify) (请说明) \_\_\_\_\_

Please state your reason for applying at MHCS (请说明您在本校申请的理由).  
 Tick ALL that applies (勾选所有适用的):  
 Change of Residence (换居住地):  From abroad (从国外) \_\_\_\_\_  
 From province (从外省) \_\_\_\_\_  Others (其他) \_\_\_\_\_  
 Programs Offered (提供课程):  
 Holistic basic education (基本教育)  
 Chinese language & computer subjects (Mandarin) (中文和电脑课)  
 Christian Education (基督教教育)  
 Computer Education (电脑课)  
 Practical Music Course (实用音乐课程)  
 Varsity Program (校队)  
 Program for Creative/Critical thinking (创意/批判性思维计划)  
 Developmentally Appropriate Preschool Program (发展适当的幼儿教育)  
 Upgraded & advanced curriculum in Math & Science (数学和科学的进阶课程)  
 Positive reputation of MHCS in the community (学校在社区中的良好声誉)  
 High admission rate to top universities both local & abroad (入学率高本地和国外的顶尖大学)  
 Outstanding achievements of alumni in their schools and board exams (校友们在校和政府会考的杰出成就)  
 Others (其他) (pls. specify) (请说明) \_\_\_\_\_

Does the applicant have any pending applications at any schools  No  Yes If YES, Name of School:  
 申请人在任何学校是否有任何未决申请 没有 有 如有是, 学校名: \_\_\_\_\_

Was the applicant ever dismissed, suspended, or placed on disciplinary probation? Please give details.  
 申请人是否被解雇, 暂停或被判处纪律试用期吗? 请说明.  
 \_\_\_\_\_

Does the applicant have any disability (申请人是否有残疾) - medical (医疗), psychological (心理), or mental condition (精神状态) (e.g. (比如) asthma (哮喘), dyslexia (阅读困难), ADD, ADHD, etc. which may have important bearing on your schooling at MHCS (这可能对您在本校有重要影响)?  
 Yes (是) (attach medical reports/history/clearance where applicable)  No  
 If YES (如是), please specify past illnesses (请说明过去的疾病): \_\_\_\_\_

Does the applicant have complete immunization (申请人是否有完全免疫)?  Yes (是)  No (否)

I have carefully read the contents of this application form. I certify that the information given herein is correct and complete. Falsification, misrepresentation, or withholding of information requested in this form will automatically nullify my application and or subject me to dismissal from MHCS.

\_\_\_\_\_  
**Student's Signature (学生签名)**

\_\_\_\_\_  
**Parent's/Guardian's Signature (家长签名)**

\_\_\_\_\_  
**Date (日期)**

**IN CASE OF EMERGENCY: 在紧急情况下**

Name (姓名) \_\_\_\_\_

Contact #: (电话号码) \_\_\_\_\_

Relationship to the Applicant (关系) \_\_\_\_\_