



# Taipei Adventist American School 台北復臨美國學校

## Summer School Application Form 夏令營申請表

The application is not complete until the school has received all the following: 請於報名時，備齊所有以下資料：

- Application fee NT 40,000 with any other fees  
申請表及所有費用
- Any ID hard copy (Taiwanese accepted)  
任何有身分證字號之證件影本(不需國外護照即可報名!)
- One photo (within 6 months old.)  
六個月內之照片
- Behavior policy acknowledgement form  
夏令營行為規範守則同意書

Photo

### Student Information 學生基本資料

NAME 學生姓名:	ENGLISH NAME 英文名字:
SCHOOL ATTENDED NOW: 目前就讀學校:	GRADE FOR 2017 八月即將就讀之年級:
NATIONALITY: 國籍	BIRTHDATE 生日:
	ID / ARC NUMBER 身分證/居留證號:

### Family Information 家庭基本資料

FATHER'S NAME 父親姓名:	MOTHER'S NAME 母親姓名:
CELL PHONE NUMBER 手機:	CELL PHONE NUMBER 手機:
EMAIL ADDRESS 電子郵件:	EMAIL ADDRESS 電子郵件:
HOME ADDRESS 地址: (中文)	HOME NUMBER 家裡電話:

### Service Information 需求選項 (Please check appropriate blanks.)

SCHOOL BUS 校車 : <input type="checkbox"/> NO <input type="checkbox"/> YES	VEGETARIAN LUNCH 素食中餐 : <input type="checkbox"/> NO <input type="checkbox"/> YES
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**Contact Information 家庭狀況 (Please check appropriate blanks.)**

MARRIAGE CONDITION 婚姻狀況 : <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased <input type="checkbox"/> Other _____
EMERGENCY CONTACT 聯絡人:
<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other _____ NUMBER : _____

**Applicant's Background 學生背景調查**

- ⊙ Has the applicant ever been diagnosed with a serious disease? Please explain the circumstances.  
學生本身是否曾被診斷有重大疾病? 若無, 請跳至第三題。若有此情況, 請詳述。

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- ⊙ What protective measures should be taken to protect the applicant, when symptoms occur?  
若一旦病發, 是怎樣的症狀? 師長又該如何保護並作第一步的照顧?

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- ⊙ Has the applicant ever been suspended from school for disciplinary reasons? If yes, please explain the circumstances.  
學生本身是否曾在學校中有行為上的缺失? 若有此情況, 請詳述。

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- ⊙ Has the applicant ever been diagnosed with any mental health or developmental issues?  
學生本身是否曾被診斷有精神發展之相關疾病? 若有此情況, 請詳述。

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- ⊙ Has the applicant ever been diagnosed with a learning disability or needed a specialized learning plan?  
學生本身是否曾被診斷有學習障礙之相關疾病? 若有此情況, 請詳述。

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**Parent's Signature \_\_\_\_\_**

**Payment 付款方式**

- ATM 電匯 Bank Transfer 

銀行代碼 Bank code	017
兆豐國際商業銀行 Mega International Bank	

  

帳號 Account number	01009-038787	戶名 Account title	臺北復臨美國學校
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- 辦公室付現 Cash

\*\*\* 請於匯款後將匯款憑據傳真至辦公室並以電話確認。

Please fax the payment slip to the office and call for confirmation.