



For Office Use Only

EXPRESSION OF INTEREST FORM

Date: _____ No: _____
 Level of Entry at SMSIS: _____
 Remarks: _____

Parents' Details

	Father	Mother
Name		
Occupation		
Employment Name & Address		
Email		
Residential Address		
Contact number		
Signature		

Tell Us About Your Child

Full Name			
Date of Birth		Gender	
Current school		Current level	
Does your child have a valid dependent pass? <i>(for expatriate students only)</i>	Yes		No
Do you have any other child studying in <i>(Kindly tick the appropriate)</i>	SMSIS	SMSS	If yes, please state how many: _____
Does your child require any special attention: <i>(Kindly tick the appropriate)</i>	Yes	No	If Yes, please state the reason:
Areas of strengths of your child			
Reason/s for leaving the current school			
Do you prefer Morning or Afternoon session? <i>(Kindly tick the appropriate)</i>	Morning Session	Afternoon Session	When do you intend to let your child join SMSIS? _____

How did you learn about our school *(Kindly tick the appropriate)*

	✓		✓
Relatives		Search Engines (i.e. Google)	
Friends/ colleagues		Social Media	
Newspaper		Other	
Why would you like to join our school?			

Please take note that this is not an enrolment form and this does not mean your child is enrolled into SMSIS. As this is an expression of interest, we will:

- Contact you once there is an available slot for your child
- Contact you for further confirmation closer to date

