



## SERI MULIA SARJANA INTERNATIONAL SCHOOL BRUNEI DARUSSALAM

### GENERAL INFORMATION

#### ADMISSION POLICY

**SERI MULIA SARJANA INTERNATIONAL SCHOOL** primarily serves the needs of expatriate community in Brunei Darussalam, and by extension, the greater Bruneian community. As such, our admissions procedure will take into account the prospective student's linguistic background and previous schooling. This is to ensure that students receive age and development appropriate education.

Admission is open to school age children from Kindergarten 1 (3 years old) to Year 6 (11 years old). Students are admitted to the grade level corresponding to their age as of 31<sup>st</sup> March in the school year of their application. Admission into a year level will take into consideration the applicant's performance in our written and oral assessments.

The school enforces a fair and non –discriminatory admissions procedure. Admission is open to any qualified applicant regardless of race, nationality, gender or social background.

#### REGISTRATION PROCEDURE:

##### Requirements:

- A fully completed and signed enrolment form (by Parents/Legal Guardian)
- Two passport sized photos of the child
- School Health Record from previous school *if applicable*(1 copy)
- Immunization/Vaccination Record (1 copy)
- Photocopy of child's birth certificate and passport (3 copies; Dependent pass stamp is required for foreigner)
- Copy of Parents' IC & Passport (3 copies each; Employment pass/ Dependent pass stamp is required for foreigner)
- School report book from previous school *if applicable* (3 copies)
- Leaving certificate from previous school *if applicable* (3 copies)
- Registration fee of B\$150.00 which is **strictly non refundable**
- Upon confirmation of enrolment, advanced payment of 2 months school fees

**Every child** who wishes to enroll must first be seen and pre-assessed by the Principal/Deputy Principal before proceeding with the registration. **ALL** students entering Kg 3 to Year 6 are required to sit for an entrance assessment **before** confirmation of admission into our school. The class of admission is determined by the results of these assessments.

#### FEES

School fees for the following levels are:

Kindergarten 1, 2 & 3	B\$235.00 per month (January to October ONLY)
Year 1 to 6	B\$255.00 per month (January to October ONLY)

##### Please take note:

**ALL MONTHLY FEES ARE TO BE PAID ON OR BEFORE THE 7<sup>TH</sup> OF EACH MONTH (the 1<sup>st</sup> week of each calendar month).**

School fees are to be paid in **FULL** regardless of the date of enrolment during the month.

#### VACATION LEAVE

Students going on vacation will need to submit a letter to the SMSIS administrative office and addressed to the Principal. School fees will need to be paid for **BEFORE** the vacation period. Failure to do so will result in the cancellation of the student's name from our school register.

***Delinquency in behavior and non-payment of school fees are considered grounds for suspension and expulsion from our school.***

#### MANDARIN LESSONS

Mandarin has been included into our syllabus as an **ELECTIVE (optional)** subject. Mandarin Lessons are offered to students from Kindergarten 1 through to Year 6.

## ADMISSION OF FOREIGN STUDENTS

As per the Regulations of the Ministry of Home Affairs and the Ministry of Education here in Brunei Darussalam. **ALL foreign students MUST apply for a STUDENT PASS in order to be eligible for education in this country. Every child must be sponsored as a dependant child under a parent who is legally working and residing in Brunei.**

## SCHOOL UNIFORM

School uniforms are **COMPULSORY** for every child in this school and are available for purchase from **Bajoo Boutique'** at Unit No C4, Ground Floor, Warisan Mata-Mata Complex, Jalan Gadong, BSB, Brunei Darussalam. CLEAN BLACK SHOES, WHITE SOCKS AND SCHOOL TIE are the attire for our school uniform. PE uniforms are also prescribed, kindly purchase these from the Bajoo Boutique'. Any form of jewellery is **NOT** permitted in school **AT ANY TIME**. Please note that it **WILL** be confiscated. **The school will NOT be held responsible for any LOST or STOLEN jewelry**. School uniforms must be in excellent condition (including ties), throughout the year, your child may be expected to replace old, worn and discoloured school uniforms.

## LABELLING OF ITEMS

It is required that ALL items belonging to your child MUST be clearly labeled with your child's name and class.

## SCHOOL HOURS

### Monday to Thursday

#### Morning sessions

Kindergarten level	8:00 am to 11:15 am
Primary level	7:20am to 12:10 pm

#### Afternoon Sessions

Kindergarten level	1:00 pm to 4:15 pm
Primary level	12:35 pm to 5:25 pm

### Friday

#### Morning sessions

Kindergarten level	8:00 am to 11:00 am
Primary Level	7:15 am to 11:00 am

#### Afternoon Sessions

Kindergarten level	2:00 pm to 4:30pm
Primary level	2:00 pm to 5:40pm

Please ensure that school hours are adhered to **STRICTLY**. Should the student attend school late on **3 occasions, it will equate to 1 day of absence**.

## WITHDRAWAL FROM THE SCHOOL REGISTER

Students with intention to leave the school will need to send in a letter stating the intention to withdraw from the school. The school must be given **TWO (2) months advanced notice**. School fees will be charged accordingly should there be **insufficient** notice given.

## CHILD SAFETY

For the safety of our students, person(s) other than parents/legal guardians designated to collect the child from the school are required to have a letter of authorization from the parents. The letter of authorization will need to include the following details:

- **NAME OF PERSON DESIGNATED TO COLLECT YOUR CHILD**
- **RELATIONSHIP TO THE CHILD**
- **BRUNEI I.C. NUMBER (WHICH MUST BE PRODUCED UPON COLLECTING THE STUDENT)**
- **CAR PLATE NUMBER**

Please take note that students, **STRICTLY**, will **NOT** be allowed to leave the school grounds without the proper authorization from parents or legal guardians.

**Please ensure that you have read and understood the above information. Please sign below in acknowledgement. Should you have further queries please do not hesitate to contact us at the front office at 2421311, 2456584 and by fax 2455780 or email us at [infodesk@smsarjanais.edu.bn](mailto:infodesk@smsarjanais.edu.bn)**

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SIGNATURE OF PARENT/LEGAL GUARDIAN

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DATE



SERI MULIA SARJANA INTERNATIONAL SCHOOL  
BRUNEI DARUSSALAM

ENROLMENT FORM

2 copies of  
Passport size  
photo

STUDENT NUMBER

Please complete in INK and in BLOCK letters

FULL NAME OF CHILD: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

NATIONALITY: \_\_\_\_\_ CITIZENSHIP: \_\_\_\_\_

PASSPORT NO: \_\_\_\_\_ BIRTH CERTIFICATE NO: \_\_\_\_\_

AGE (as of 1st January): 20 \_\_\_\_\_ (Year) \_\_\_\_\_ and (Months) \_\_\_\_\_ GENDER: MALE/FEMALE

RACE: \_\_\_\_\_ RELIGION: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ IC NO. \_\_\_\_\_ COLOUR \_\_\_\_\_

FATHER'S CITIZENSHIP: \_\_\_\_\_ NATIONALITY: \_\_\_\_\_

FATHER'S OCCUPATION: \_\_\_\_\_ SECTOR: PRIVATE  GOVERNMENT

POSITION: \_\_\_\_\_ MINISTRY \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

COMPANY'S NAME \_\_\_\_\_

OFFICE ADDRESS: \_\_\_\_\_

CONTACT NUMBERS: (OFFICE) \_\_\_\_\_ (ext) \_\_\_\_\_ MOBILE) \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

CONTACT NUMBER (HOME) \_\_\_\_\_ FATHER'S EMAIL: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_ IC NO. \_\_\_\_\_ COLOUR \_\_\_\_\_

MOTHER'S CITIZENSHIP: \_\_\_\_\_ NATIONALITY: \_\_\_\_\_

MOTHER'S OCCUPATION: \_\_\_\_\_ SECTOR: PRIVATE  GOVERNMENT

POSITION: \_\_\_\_\_ MINISTRY \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

COMPANY'S NAME: \_\_\_\_\_

OFFICE ADDRESS: \_\_\_\_\_

CONTACT NUMBERS: (OFFICE) \_\_\_\_\_ (ext) \_\_\_\_\_ (MOBILE) \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

CONTACT NUMBERS (HOME) \_\_\_\_\_ MOTHER'S EMAIL: \_\_\_\_\_

PERMANENT OVERSEAS HOME ADDRESS (for foreign students ONLY): \_\_\_\_\_

PERMANENT OVERSEAS CONTACT NUMBERS (Including IDD and area code): \_\_\_\_\_

IS THIS CHILD RESIDING WITH BOTH PARENTS? YES  NO

IF NOT, THEN PROVIDE REASONS: \_\_\_\_\_

**PARTICULARS OF PREVIOUS SCHOOL(S), IF APPLICABLE**

NAME OF SCHOOL: \_\_\_\_\_

CLASS AT TIME OF LEAVING: \_\_\_\_\_ DATE OF LEAVING: \_\_\_\_\_

REASON FOR LEAVING (*must be filled*): \_\_\_\_\_

REFERENCE NO. FOR PREVIOUS STUDENT PASS: \_\_\_\_\_

INTENDED DATE OF JOINING SMSIS: \_\_\_\_\_

BEHAVIOURAL REPORT: GOOD/AVG/POOR

PROFICIENCY OF ENGLISH: V.GOOD/GOOD/AVERAGE/WEAK/NIL

**ABOUT YOUR CHILD:**

**IN THE PAST HAS YOUR CHILD:**

- REPEATED IN ANY YEAR LEVEL? YES / NO IF YES, WHICH LEVELS & WHY: \_\_\_\_\_
- BEEN SUSPENDED/EXPELLED FROM ANY PREVIOUS SCHOOL/S: YES / NO  
IF YES WHY & DURATION: \_\_\_\_\_

**DOES YOUR CHILD:**

- WEAR GLASSES: YES / NO
- HAVE BEHAVIOURAL ISSUES: YES / NO
- HAVE ANY LEARNING DIFFICULTIES: YES / NO  
IF YES PLEASE PROVIDE DETAILS: \_\_\_\_\_
- HAVE LEARNING ASSISTANCE/SUPPORT YES / NO IF YES, WHY? \_\_\_\_\_

PLEASE LIST SIBLINGS STUDYING IN SERI MULIA SARJANA SCHOOL OR SERI MULIA SARJANA INTERNATIONAL SCHOOL

- |          |              |                              |                                |
|----------|--------------|------------------------------|--------------------------------|
| 1. _____ | CLASS: _____ | SMS <input type="checkbox"/> | SMSIS <input type="checkbox"/> |
| 2. _____ | CLASS: _____ | SMS <input type="checkbox"/> | SMSIS <input type="checkbox"/> |
| 3. _____ | CLASS: _____ | SMS <input type="checkbox"/> | SMSIS <input type="checkbox"/> |

*In order for the school to partner with the home to provide the best education to your child, we would like some background information. Kindly complete this section.*

**What are your expectations of YOUR child by enrolling into our school:**

**What are your expectations of YOUR child and the school:**

**The school's expectations of YOUR child and the family:**

- ✓ *To uphold the school's mission, vision, values and image at all times (in and out of school)*
- ✓ *For the parent/guardian to work closely and together with the school to educate the child*
- ✓ *To be confident, open minded and well-rounded individuals*
- ✓ *To be an active learner both in academics and non-academics*

**MEDICAL DETAILS OF YOUR CHILD**

*CURRENT / CHRONIC HEALTH PROBLEMS:*

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*KNOWN ALLERGIES:* \_\_\_\_\_ *TREATMENT:* \_\_\_\_\_

*TAKING ANY REGULAR MEDICATION:* \_\_\_\_\_

**PERSON TO CONTACT IN CASE OF EMERGENCY**

*(Please ensure that the person you nominate below is able to communicate in English and he/she should know of this obligation)*

*NAME OF PERSON:* \_\_\_\_\_ *RELATIONSHIP TO THE CHILD:* \_\_\_\_\_

*CONTACT NUMBERS:*

*(OFFICE):* \_\_\_\_\_ *(HOME):* \_\_\_\_\_ *(MOBILE):* \_\_\_\_\_

**PLEASE READ CAREFULLY:**

IN THE CASE OF AN EMERGENCY OR ACCIDENT, SHOULD THE SCHOOL BE UNABLE TO CONTACT OR NOTIFY THE PARENTS, THE SCHOOL WILL TRANSPORT YOUR CHILD TO THE HOSPITAL AND ACT IN PLACE OF THE PARENTS.

**\*\*\* Your signature will indicate your permission for the above\*\*\***

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SIGNATURE OF PARENT/LEGAL GUARDIAN

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DATE

**FOR OFFICE USE ONLY**

Registration number: \_\_\_\_\_ Date of enrolment: \_\_\_\_\_

Class of Admission: \_\_\_\_\_ Teacher: \_\_\_\_\_ Session: AM  PM

Date of commencement: \_\_\_\_\_ Child assessed by: \_\_\_\_\_

**ASSESSMENT**

Entrance Test for: KG \_\_\_\_\_ or PRIMARY \_\_\_\_\_ Assessed by: \_\_\_\_\_

**ENTRANCE TEST SCORES:**

Maths	<input type="text"/>	English	<input type="text"/>	General Knowledge (Pre-School Only)	<input type="text"/>
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REMARKS by assessor (Assessor to complete the following)

English: \_\_\_\_\_

Reading: \_\_\_\_\_

Maths: \_\_\_\_\_

Cooperation: \_\_\_\_\_ Understanding: \_\_\_\_\_

Other remarks: \_\_\_\_\_

**CHECKLIST (to be completed by the office staff)**

- |                                      |                          |  |                          |
|--------------------------------------|--------------------------|--|--------------------------|
| Completed and signed form            | <input type="checkbox"/> | Photocopy of birth certificate         | <input type="checkbox"/> |
| Two (2 passport sized photos)        | <input type="checkbox"/> | Leaving Certificate (if applicable)    | <input type="checkbox"/> |
| School report book (if applicable)   | <input type="checkbox"/> | School Health Record (if applicable)   | <input type="checkbox"/> |
| Copy of Parents' IC                  | <input type="checkbox"/> | Copy of Parents' Passport              | <input type="checkbox"/> |
| Student Pass (foreign students only) | <input type="checkbox"/> | Copy of child's Passport               | <input type="checkbox"/> |
| Registration fee of B\$150.00        | <input type="checkbox"/> | Advanced Payment: 2 months school fees |                          |

Receipt No.: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt No. \_\_\_\_\_ Date: \_\_\_\_\_

Approved by:

Remarks:

\_\_\_\_\_  
Principal Signature & Date

\_\_\_\_\_  
Principal Remarks