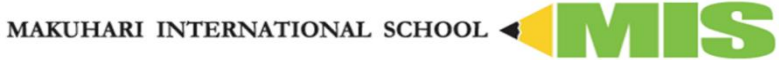


Office Use	<input type="checkbox"/> Term 1	<input type="checkbox"/> Term 2	<input type="checkbox"/> Term 3
	<input type="checkbox"/> Foreign Nationality	<input type="checkbox"/> Dual Nationality	<input type="checkbox"/> Non-Returnee Japanese
<input type="checkbox"/> Japanese Returnee			

Please glue a photograph of the applicant here

- Size: 35 × 45 mm
- Taken within the last 6 months
- Write the name on the back

MAKUHARI INTERNATIONAL SCHOOL APPLICATION FORM (Pre-School 2026-27)



STUDENT INFORMATION	Name in English	Last Name	First Name	Middle Name	
	ふりがな			Date of Birth	
	氏名 (漢字) Name in Japanese			Gender	
			Year	Month	
			Day		
	Nationality	Main Language/s			
	Does he/she have siblings at Makuhari International School? <input type="checkbox"/> Yes / <input type="checkbox"/> No				
If so, please write the MIS student's name and class. (Class: Name:)					
1) Current Address 現住所 (If you live in Japan, please fill in Japanese if possible. 日本にお住いの場合は日本語でご記入ください。)					
(〒)					
PARENT	Name (in English)	Last Name	First Name	Middle Name	Nationality
	ふりがな				
	氏名 (漢字) Name in Japanese				Mobile Phone
	Email Address				Main Language/s
	Employer				Work Phone
PARENT	Name (in English)	Last Name	First Name	Middle Name	Nationality
	ふりがな				
	氏名 (漢字) Name in Japanese				Mobile Phone
	Email Address				Main Language/s
	Employer				Work Phone

STUDENT INFORMATION	SCHOOL HISTORY (日本の学校の場合、日本語で記入)	Current school he/she attends ()	
		Language of Instruction () Country ()	
		Period Attended (Year / Month / Day ~ Year / Month / Day)	
		Previous school he/she attended ()	
	Language of Instruction () Country ()		
	Period Attended (Year / Month / Day ~ Year / Month / Day)		
	YOUR CHILD'S LANGUAGE ABILITY	Is English used at home? <input type="checkbox"/> Every day / <input type="checkbox"/> Most days / <input type="checkbox"/> Some days / <input type="checkbox"/> Rarely / <input type="checkbox"/> Never	
		How long has your child been speaking English? []	
		Is Japanese used at home? <input type="checkbox"/> Every day / <input type="checkbox"/> Most days / <input type="checkbox"/> Some days / <input type="checkbox"/> Rarely / <input type="checkbox"/> Never	
		How long has your child been speaking Japanese? []	
EXPERIENCE LIVING ABROAD	Country Stayed ()		
	Period Stayed (Year / Month / Day ~ Year / Month / Day)		
	Country Stayed ()		
	Period Stayed (Year / Month / Day ~ Year / Month / Day)		
Does your child have any food allergy? ↓		<input type="checkbox"/> Yes / <input type="checkbox"/> No	
If YES, please explain in detail.		[]	
If your child goes by another name (e.g., nickname), please let us know.			
Please explain how you found out about the school.		<input type="checkbox"/> Web / <input type="checkbox"/> Friends or Family / <input type="checkbox"/> Social Media / <input type="checkbox"/> School Event <input type="checkbox"/> Other ()	
FOR ALL PARENTS – ANY ADDITIONAL INFORMATION YOU WOULD LIKE TO ADD? PLEASE WRITE BELOW.			
[]			
I declare that the details mentioned above are true and complete. I agree to follow the Makuhari International School Home School Agreement as well as the Parent Handbook and MIS Parent/Guardian Positive Engagement Expectations.			
Signed _____		Date _____	

All information disclosed in this form will be treated as confidential by the school and not shared with any third parties, nor used for any other purposes.