



**KICS**  
PREP SCHOOL

# Admission Seminar

STUDENT'S NAME : \_\_\_\_\_  
LAST FIRST MIDDLE

DATE OF BIRTH : \_\_\_\_\_ GENDER :  MALE  FEMALE  
DAY / MONTH / YEAR

CURRENT SCHOOL/GRADE : \_\_\_\_\_

COUNTRY : \_\_\_\_\_

PRIMARY LANGUAGE : \_\_\_\_\_

EMAIL ADDRESS : \_\_\_\_\_

GUADIAN'S NAME : \_\_\_\_\_  
LAST FIRST MIDDLE

GUADIAN'S PHONE NUMBER : \_\_\_\_\_

CAMPUS :  INCHEON  SEOCHO  ONLINE SCHOOL  BELLEVILLE, USA

DESIRED APPOINTMENT DATE : \_\_\_\_\_

WHERE DID YOU GET THE INFORMATION ABOUT KICS?

: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

FAX THIS COMPLETED FORM TO (032)668-2033  
OR MAIL TO KICS OFFICE OR E-MAIL TO MASTER@KICSCHOOL.COM

APPLY ONLINE AT KICSCHOOL.COM