Passport

Size

Photo

**VICTORIA ACADEMY**

**Address:**

No.789, Dingdi Street, Zaythit Ward, Chin Oo Sii Hakha, Hakha

**Office Phone:** 09408123526

**Email:** victoriaacademy.hk@gmail.com

**APPLICATION FORM**   
FOR ADMISSION

**Form-01**

1. **Personal Information: Student and Family**

**Student Information:**

|  |  |
| --- | --- |
| **Name (English)** |  |
| **Name (Burmese)** |  |
| **Preferred Name** |  |
| **Date of Birth** |  |
| **Sex** | Male 🗖 Female 🗖 Other 🗖 |
| **Marital Status** | Married 🗖 Single🗖 Other 🗖 |
| **Place of Birth (village, township)** |  |

**Parent/Guardian Information:**

|  |  |
| --- | --- |
| **Father’s Name** |  |
| **Occupation** |  |
| **Mother’s Name** |  |
| **Occupation** |  |
| **Guardian** (*only for parentless student*) |  |
| **Occupation** |  |

1. **Home Address and Contact Information**

|  |  |
| --- | --- |
| **Current Home Address** |  |
| **Home Phone** |  |
| **Mobile Phone** |  |
| **Email Address** |  |

1. **Sibling Information:** If you have any siblings, please write their names, dates of birth, current addresses, and occupation. If you need more space, use a separate paper and attach it to your application form.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Name** | **Date of Birth (yy/mm/dd)** | **Current Address** | **Occupation** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |
| **5.** |  |  |  |  |
| **6.** |  |  |  |  |

1. **Emergency Contact Information**

Please provide us with any contact person whom we can reach to in case of emergency.

|  |  |
| --- | --- |
| **Name** |  |
| **Relationship** |  |
| **Mobile Phone** |  |
| **Address Line (1)** |  |
| **Address Line (2)** |  |

1. **Educational Background Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Level of Education or Degree** | **Name of School/College** | **Place (City/Township)** | **Year of Completion/ Graduation** |
| **Primary** |  |  |  |
| **Middle** |  |  |  |
| **High** |  |  |  |
| **University (degree)** |  |  |  |

**Additional Information on Educational Background**

|  |  |
| --- | --- |
| What major subject did you specialize for your Matriculation? (e.g., Science (Bio) or Arts (Eco)) |  |
| If you are a university student, on which year are you now? |  |
| If you are a university student, what major subject are you specializing? |  |

1. Beside the above-mentioned information on your educational background, do you hold any other degree or certificate from any education and training institution?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Degree/Certificate/Subject** | **Date and Time** | | **Name of School/Training Center** | **Place (City/Township)** |
| **Start Date** *(yy/mm/dd)* | **End Date**  *(yy/mm/dd)* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. **Occupational Background Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Place of Employment (Company/Organization)** |  | | | |
| **Position** |  | | | |
| **Date and Time** | Start Date |  | End Date |  |
| **Salary** | 🗖 Paid employee 🗖 Unpaid Volunteer  🗖 Other : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **Main Tasks and Responsibilities** |  | | | |

1. **Health Information**

Please tick the following medical conditions you have ever been diagnosed or treated for.

|  |  |
| --- | --- |
| HIV 🞎 Hepatitis B 🞎 Hepatitis C 🞎  High Blood Pressure 🞎 Heart Disease 🞎 Lung disease 🞎  Stomach disease 🞎 Diabetes 🞎 None of these diseases 🞎 | |
| Any Other Medical Condition (*not listed above*) |  |

1. **Why do you want to study at Victoria Academy? Explain your reasons for applying to this Academy.** If you need more space, use a separate paper and attach it to your application form.

|  |
| --- |
|  |

**Recommendation Form  
(Community Leader)**

**Form-02**

**A Note to the Recommender**: As you complete recommendation form for this applicant, kindly make sure with careful examination that the applicant has sufficient intellectual and financial resources in order to successfully achieve his/her educational goals at Victoria Academy.

1. **Recommender’s Information**

|  |  |
| --- | --- |
| **Name** |  |
| **Occupation and Office Address** |  |
| **Home Address** |  |
| **Mobile Phone** |  |
| **Email Address** |  |

1. **What is your relationship with the applicant? How many years have you associated with the applicant?**

|  |  |
| --- | --- |
| **Relationship** |  |
| **Length of association with appliant** |  |

1. **What are the applicant’s weaknesses and strengths?**

|  |  |
| --- | --- |
| **Weaknesses** | **Strengths** |
|  |  |

1. **After careful evaluation, please rate the applicant’s abilities.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Applicant’s Characteristics** | **Poor** | **Average** | **Good** | **Outstanding** | **Unable to Evaluate** |
| Motivation to study and learn new things |  |  |  |  |  |
| Academic Strength |  |  |  |  |  |
| Ability to think critically |  |  |  |  |  |
| Leadership skills |  |  |  |  |  |
| Attitude and Enthusiam |  |  |  |  |  |
| Social skills |  |  |  |  |  |
| Teamwork |  |  |  |  |  |
| Maturity |  |  |  |  |  |
| Active involvement in local community activities |  |  |  |  |  |
| Commitment to community development |  |  |  |  |  |

**Pledge**: I, as an evaluator, avow that all this information about the applicant is accurate and has no distortion. I acknowledge that any misinformation about the applicant can prohibit him/her from admission to the Academy.

Name of Applicant : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Issue : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Note of Thanks**: We the Academy Team express our heartfelt gratitude for sacrifing your invaluable time to complete this recommendation letter in support of the applicant and the Academy.

# Recommendation Form (Parent or Guarantor)

**Form-03**

1. I certify that all the information given by the applicant is trustworthy.
2. I believe that the applicant will be able to actively involve in the following activities of the Academy:
   1. Local community activities,
   2. A once-in-three-month internship in nearby villages
   3. Countrywide student activities and student exchange program at least twice a year
   4. Field studies at course-concerned places
   5. A week-long fieldwork in nearby villages
   6. Student fellowship activities inside and outside of school (e.g., playing sports, fund-raising with other youth organizations, etc.)
3. I acknowledge that parent/guardian and Victoria Academy need to work collaboratively by mutually informing the applicant’s involvement in all the above-mentioned school activities.
4. I concur that if the applicant undergoes any unexpected emergency case while attending at the Academy, aid and support will be provided only in accordance with the Academy’s insurance company.

1. I contend that the applicant will be dismissed from the Academy if he/she fails to follow any rule and regulation more than three times and fails to fulfil any course requirements for each subject.

1. I recognize that the applicant’s growth depends not only on the Academy but also on parent or guardian.

**Pledge**: I deliver this applicant to study at the Academy for two years after having considered and agreed upon all the conditions written in this form.

Name of Parent/Guarantor : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NRC No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School Fees Information**

1. **School fees for one academic year is Ks. 120,000 which must be paid either once in full or twice in half. If those who choose the second option, half of school fees must be paid once in six months**.

|  |  |  |
| --- | --- | --- |
| **Academic Terms** | **Payment Deadline** | **Amount** |
| First 6 month (Jan-June) | 15 January 2020 | Ks. 60,000 |
| Second 6 month (July-Dec) | 15 July 2020 | Ks. 60,000 |
| Third 6 month (Jan-June) | 15 January 2021 | Ks. 60,000 |
| Fourth 6 month (July-Dec) | 15 July 2021 | Ks. 60,000 |

School fees for one month is Ks. 10,000. Monthly payment, however, is not allowed. Alternative to paying school fees is shown below in greater details. Tick the alternative you choose.

|  |  |  |  |
| --- | --- | --- | --- |
| **Alternatives** | **Choice (√)** | **Payment Procedure** | **Amount** |
| Once a year |  | Must be paid fully before the end of January. | Ks. 120,000 |
| Twice a year or once in every period of six months |  | Half of school fees must be paid in January. | Ks. 60,000 |
| The remaining half must be paid in December. | Ks. 60,000 |
| Once in every four month period |  | Ks. 30,000 (25%) of school fees must be paid four times a year, respectively in January, April, August and December. | Ks. 30,000x4 =  Ks. 120,000 |

1. **Hostel Fees and Food Expense**

Hostel fees, together with food expense, required by the Academy is Ks. 40,000 per month. Students who do not request accommodation and food provided by the Academy do not need to pay for this fees. Regarding payment procedure, hostel fees (food expense included) can be paid either once a month or once in every three month period. Hostel fees cover the following items:

1. Bed (not including mattress and blanket)
2. House
3. Hostel maintenance
4. Food
5. Cook’s salary

Student will not be charged for any reason more than Ks. 40,000 per month for hostel accommodation. The Academy will take full responsibility in paying for hostel accommodation even if it might cost a student more than Ks. 40,000 per month. If you really need the Academy’s hostel accommodation, please complete the application form, **Form-04**, and submit it alongside the application form for school admission.

1. **Insurance and Uniform Fees**

|  |  |
| --- | --- |
| Student Wellness Fee | Ks. 25,000 (*this fee will not be returned if the student leaves or is dismissed from school before graduation*) |
| Uniform fee | Ks. 30,000 (*this fee will be charged only once*) |

**Hostel Accommodation Application Form**

**Note:** *This form applies only to applicants who need to request hostel accommotion. Do not complete or submit this form unless you request hostel accommodation.*

**Form-04**

1. **Student Particulars**

|  |  |
| --- | --- |
| **Name** |  |
| **Sex** | Male 🗖 Female 🗖 Other 🗖 |
| **Date of Birth** |  |
| **Mobile Phone** |  |
| **Email Address** |  |
| **Permanent Address** |  |

1. **Explain your reasons clearly for requesting hostel accommodation**.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Have you ever had experience of living in any hostel accommodation?** (e.g., during your life at Matriculation or at university, etc.)

Yes 🗖 No 🗖

1. **Supply some examples for the problems of living with a large number of students and means of solving them.**

|  |  |
| --- | --- |
| **Problems** | **Solutions** |
|  |  |
|  |  |
|  |  |
|  |  |

1. **What kinds of benefits do you expect from staying at hostel accommodation? How will it effect your academic life at school?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pledge:** If I am granted my request for hostel accommodation, I will try my best to abide by all the rules and regulations of the Academy with regard to hostel stay.

Name of Applicant : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Issue : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Financial Aid Application Form**

**Form-05**

**Note**: *This application form applies only to students who are from necessitous families and have acute financial need. Do not complete and submit this form unless you need to request for financial aid*.

Students eligible to apply for financial aid should be:

* 1. poor in finance or material but passionate about academic growth;
  2. non-citizen of Hakha who comes from different townships and lacks adequate accommodation in Hakha
  3. available to serve the Academy during school holidays
  4. constantly growing in academic studies.

The Academy can offer financial aid only to a limited number of students. Thus, after carefully evaluating the financial conditions of applicants, only those who are in acute need will be granted aid.

1. **Personal Information**

|  |  |
| --- | --- |
| **Name** |  |
| **Sex** | Male 🗖 Female 🗖 Other 🗖 |
| **Age** |  |
| **Mobile Phone** |  |
| **Email Address** |  |
| **Permanent Address** |  |

1. **Two types of scholarship**: Financial aid is divided in two: Full scholarship and partial scholarship. Choose only one type of scholarship.
   1. Full scholarship 🗖
   2. Partial scholarship 🗖
2. Describe your financial need and reasons for applying this aid.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Write briefly about your native village/township.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How will you support the Academy during its school hours and holidays? Mention some specific areas where you can serve (e.g., school maintenance, helping office works, etc.).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reviewing All Application Forms**

|  |  |
| --- | --- |
| Application Form for Admission Form | 🗖 Yes 🗖 No |
| Community Leader’s Recommendation Letter | 🗖 Yes 🗖 No |
| Parent/Guarantor Recommendation Letter | 🗖 Yes 🗖 No |
| Hostel Accommodation Application Form | 🗖 Yes 🗖 No |
| Financial Aid Application Form | 🗖 Yes 🗖 No |
| Matrication Passed Certificate and/or University Degree Certificate (one copy) | 🗖 Yes 🗖 No |
| Certificate/Proof of Other Trainings Completed | 🗖 Yes 🗖 No |
| Passport Size Photo (3 copies) | 🗖 Yes 🗖 No |
| Family Registration (one copy) | 🗖 Yes 🗖 No |
| NRC (one copy, *only if you have*) | 🗖 Yes 🗖 No |

**Pledge**: Every information I have completed in all the application forms is trustworthy with no distortion. Moreover, I have completed all the required application forms. I acknowledge that the Academy will not accept and enroll me if my submitted application is incomplete.

Name of Applicant : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Issue : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICATION FOR SUBMISSION DEADLINE**

**15 October 2019**

~~~~ **Good Luck** ~~~~