



学生信息 STUDENT INFORMATION				
姓名 / Name				
出生年月日 / Date of Birth				
性别 / Gender		□男 / Male	· □女/	Female
家庭住址 / Home Address				
电话号码 / Phone Number				
血型/ Blood Type:				
您的孩子的保险公司名称 Insurance company:				
保险编号 / Insurance No.:				
当前是否在进行任何医药治疗 Any Current Medications				
健康信息 HEALTH INFORMATION				
请根据孩子健康状况回答以下问题,我们将对所有信息保密。如果问题回答为"是",请说明用药和治疗如需要,可以附加相关文件。 Please answer the following questions regarding the health condition of the student. All information be kept confidential. For Yes answer, please list any treatment or medication. Please attach additional documents as needed.		condition of the student. All information will		
健康情况 / Health condition		是/Yes	否/No	治疗 / 用药 / Treatment / Medication
多动症 / 注意力不集中 / ADD/ADHD				
哮喘 / Asthma				
水痘 / Chicken Pox				
尿床 / Bedwetting				
骨骼问题 / Bone / Skeletal Problems				
糖尿病 / Diabetes				





本校根据国家规定配置安装符合国家安全标准的设施设备,定期对设施设备进行检查,为确保学生的身心健康和生命安全,请家长遵守如下条款:

According to the national regulations, our school configures and installs facilities and equipment that meet the national safety standards, and regularly checks the facilities and equipment. In order to ensure the physical and mental health and life safety of students, parents are requested to abide by the following terms:

1.配合学校对学生进行安全教育、管理和保护,不让学生携带危险品到校(如刀具、打火机、腐蚀性物品以及有可能对别人和自己造成人身伤害的物品等)。

Cooperate with the school to carry out safety education, management and protection for students, and prevent students from carrying dangerous goods to the school (such as knives, lighters, corrosive goods and articles that may cause injury to others and themselves, etc.)

2.若自己的孩子行为失当,给他人造成伤害,或对自己和他人的物品造成伤害,监护人应承担相应的后果。 When a student behaves inappropriately, causing harm to others, or causing damage to the property of himself /herself or others, the student's guardians shall bear the corresponding consequences.

3.学生在校内突发疾病,我校第一时间通知家长,若家长不能及时到校,我校在保健医同意后带学生到就近医院就医。 If the students have a sudden illness in the school, our school will inform the parents at the first time. If the parents can't arrive at the school in time, our school will take the students to the nearest hospital for medical treatment with the consent of the health care doctor (staff).

家长签字/Signature:		ıre:	 	
日	期/Date:			





## QUESTIONNAIRE ON FAMILY-SCHOOL EDUCATION 家校共育问卷调查



2.学生的艺术特长是否获得哪些等级证书、奖励?如果有,请列举:

Are there any certificates or awards the student received for the artistic expertise? If yes, please list:

3.学生的艺术特长如果是表演方面,请列举演出及获奖经历:

If the student's artistic expertise is in performance, please list :



4.关于学生参加学校的对外活动,您是否支持,有什么看法? Regarding students participating in school's external activities, will you support such events and what are your opinions?
5.关于学校组织的实践性、研学活动,您是否支持,有什么看法? Do you support the practical and research activities the school organizes? What are your opinions?
6.关于我校学生参与电视台录制或合作单位联合举办的活动,您是否支持,有什么看法? Regarding the participation of our students in TV station recordings or activities jointly organized by partner units, do you support it? What are your opinions?