



DORMITORY FORM

ACADEMIC YEAR 2017

Resident's Particular

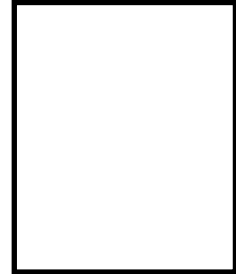
Student ID semester 1 2 3

Name of Resident : _____ Gender Male Female

Home Address : _____

Contact Details : : Home (____) _____ Mobile Phone: _____

E-mail: _____ Passport No. : _____



Parents/ Guardian Information (please give checklist (v) on the box you choose)

	Father	Mother	Guardian
Name			
Home No.			
Office No.			
Mobile No.			
E-Mail			
Passport No.			
Nationality			

Type of Room Preferred

Single Occupancy Room (Air conditioned) 1st to 2nd floor, size 24 Square meters.

Length of stay _____ Until _____ (dd/mm/yy)

Double Occupancy Room (Air conditioned) 1st to 2nd floor, size 40 Square meters.

Length of stay _____ Until _____ (dd/mm/yy)

Corner Occupancy Room (Air conditioned) 4th to or 7th floor, size 38 Square meters.

Length of stay _____ Until _____ (dd/mm/yy)

I understand that my friend/relative/sibling may not be assigned as my roommate and agree to accept Suan Sunandha International School of Art (sisa) is final decision. I also understand that my roommate cannot be replaced with other and Suan Sunandha International School of Art (sisa) has the right not to accommodate any special request on room allocation.



Any current medical problem or medication (such as: asthma, allergies, Heart Disease, etc):

No

Yes, mention: _____

Please write down any special information about yourself (e.g. health/medical conditions, scholarship, etc) that you would like Suan Sunandha International School of Art (SISA) to be aware about.

Parents/Guardian Declaration:

I declare that I give permission to my child named above to be the Resident of Suan Sunandha International School of Art. In the event of accident and/or serious illness happen to my child in Suan Sunandha International School of Art, I give Suan Sunandha International School of Art. My permission to bring my child to the doctor/ clinic / hospital to get immediate treatment. I agree to pay any balance in excess of the amount covered by my child's insurance to of Suan Sunandha International School of Art .

RENTAL AGREEMENT ACADEMIC YEAR 2017/2018

I fully understand that Suan Sunandha International School of Art charges the following rent, and thus agree to pay the following:

Room Type	Price/ Month	Amount to be transferred**	Damage deposit	key card
Single Occupancy Room (Air conditioned)	4,500 Bath	Price/Month x Length of Stay (months)	9,000 Bath	Free
Double Occupancy Room (Air conditioned)	6,500 Bath		9,000 Bath	Free
Corner Occupancy Room (Air conditioned)	8,500 Bath		9,000 Bath	Free

Note: Damage deposit

A damage deposit or deposit is a sum of money paid in relation to a rented item to ensure it is returned in good condition. They are particularly common in relation to rented accommodation, where they may also be referred to as a tenancy deposit or in some places a bond.

The owner of the item (the landlord in the case of accommodation) will take a sum of money from the person(s) renting the item (the tenant). If the item is returned in good condition at the conclusion of the tenancy the owner should return the deposit. If the item is returned with damage beyond normal wear and tear, the cost of repairing that damage may be charged against the deposit, and part (or none) of the deposit will be returned.

* The fee is valid for January 2017 – January 2018

** Exclude bank charges

Monthly rental price for each unit includes:

- (1) Electricity bill 7 / per unit
- (2) Water bill 25 / per unit
- (3) Room rental fee

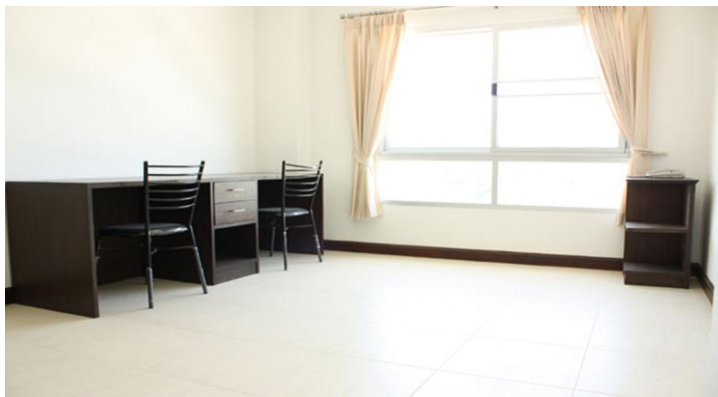


Room Type

1) Single Occupancy Room (Air conditioned) 1st to 2nd floor, size 24 Square meters



2) Double Occupancy Room (Air conditioned) 1st to 2nd floor, size 40 Square meters



3) Corner Occupancy Room (Air conditioned) 4th to or 7th floor, size 38 Square meters.





DECLARATION FORM

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We as Parents/Guardian and Suan Sunandha International School of Art Resident applicant understand and accept:

- 1.The Resident agrees to uphold and support Suan Sunandha International School of Art and its reputation and will not commit any actions that will go against the reputation of the institution. I understand that the Resident may be terminated from Suan Sunandha International School of Art if the Resident is found guilty of such doing.
2. We have read, acknowledged and understood following forms and agree to comply accordingly such as Suan Sunandha International School of Art APPLICATION FORM and RENTAL AGREEMENT ACADEMIC YEAR 2017/2018 have the obligation to make each and all financial payment according to the schedule outlined by Suan Sunandha International School of Art Management.
3. The Resident has the obligation to comply with all rules and regulation at Suan Sunandha International School of Art, which are stated in, but not limited to, the Suan Sunandha International School of Art Handbook.

I / We hereby certify that, to the best of my knowledge, the above information is true and correct

_____ / _____

Place

Date

Parents/Guardian

Resident

Signature & Full Name

Signature & Full Name