



Application for Admission

Date _____

Grade you are applying for _____ Requested date of admission _____

Child's Name _____ M/F
Surname First Middle

Home Address _____

Phone(H) _____ Child's Birthdate _____ Health Card # _____
MM/DD/YYYY (optional)

Mother/Guardian _____ email _____ cell _____

Father/Guardian _____ email _____ cell _____

Church (if applicable) _____

Name & address of previous school _____

IEP or Identified Special Educational Needs? _____

OFFICE USE ONLY

Interview Date _____ Interviewers _____

Pastoral Letter Rec'd _____ Statement of Faith Signed _____

DOB Document provided _____ (birth certificate, passport, etc.)

Additional Information or Comments: _____

