



# BC CHRISTIAN ACADEMY

*Equipping students to impact the world for Christ*

EST. 1990

## LOCAL APPLICATION FORM

Kindergarten – Grade 12  
Academic Program

### *MISSION STATEMENT*

*To assist the family by providing a Christ-centered, Bible-based education that inspires each student to pursue excellence in spiritual growth, moral character, academics, fine arts, physical fitness and service to others.*

[www.bcchristianacademy.ca](http://www.bcchristianacademy.ca)

We welcome your interest in seeking admission for your child(ren) at British Columbia Christian Academy. Admission to the school is based on the policies outlined as per the attached pages. It is important that you carefully read the Admissions Procedures, Statement of Faith, Parents' Code and the Tuition Policy. An application will not be considered unless, and until, the school receives all the items listed below.

- The completed New Local Student Application Form
- A completed New Student Information Form for each student (Grades 1-12)
- Proof of Age (e.g. copy of birth certificate)
- Kindergarten Questionnaire form (if applicable)
- A completed Inclusive Education form (if not applicable, please write N/A across the page and sign)
- A copy of the student's current report card and a full year report from the year prior (2 years of records)
- In the case of students born outside of Canada, proof of citizenship or landed immigrant status
- A copy of IEP or any other learning support/diagnostic reports (if applicable)

**If your child requires learning or behavioral assistance that has not been disclosed to the school, British Columbia Christian Academy has the right to withdraw the student.**

Upon receipt of all the above information, you will be notified of an interview date with the Principal. The presence of both parents at the interview is required except under unusual circumstances. Early application is recommended.

A non-refundable \$250.00 per family registration fee must be paid upon submission of application. Once acceptance has been confirmed, a \$500 deposit towards the total tuition fee is due and payable to hold placement for the student.

## **WAITLIST POLICY**

If the school needs to limit its enrollment, the priority rating system listed below will be used.

1. Siblings of children in the school.
2. Children of Christian Parents regularly attending church who promote and teach Christian Principles through Bible Study and prayer in the home and by consistent fellowship in a church community which embraces and promotes the Lordship of Jesus Christ.
3. Children of parents from other Christian schools.
4. The above families will be considered based on their child's academic progress, behavior and Christian walk.
5. Date of application

If your child has been placed on a waiting list, a new application is not necessary every year, provided you contact the Admissions Office (in writing) prior to October and notify us of your wish that the student's name remains on the wait list. If we do not hear from you, we will automatically discard the applications.

## **POLICIES RELATING TO ADMISSIONS AND FEE PAYMENTS**

Standard tuition rates apply to all students admitted to the school. The following policies apply unless arrangements have been made with the business office.

1. In making this application, I/we understand and agree with the purpose of British Columbia Christian Academy (BCCA) as set out in the handbook and acknowledge that I am applying to enroll my child because of my earnest desire that he/she receives a Christ-centered education.
2. I/We understand that all tuition payments and fees are due at the beginning of each school year. If payments are made monthly, it is due on the first of the month. A late fee of \$50 will be assessed on any tuition payments received after the fifteenth of the month.
3. I/We understand that monthly tuition payments will be paid by EFT (Electronic Funds Transfer) and the tuition amount will be automatically deducted from my/our bank account on the first of each month.
4. I/We understand that any dishonored (returned) payment must be paid promptly with a service charge of \$45 and late fees, if applicable.
5. I/We understand that if my/our account is in arrears greater than 90 days, the matter will be reviewed by the Tuition Committee, and/or the BCCA board which may result in your child(ren) from being permitted to continue attending BCCA until suitable payment arrangements are made.
6. I/We understand when a student voluntarily withdraws from the school for any reason, two months *written* notice must be given. In lieu of notice, a one-month tuition payment is due and payable to the school. Any registration fees, student activity fees and tuition deposit is considered non-refundable.
7. I/We understand that a non-refundable deposit of \$500 confirms the student(s) enrollment into the coming school year. The deposit will be divided and applied towards the monthly tuition from September to June.

8. I/We understand that a registration fee of \$250 is payable every school year and is not refundable when the family changes their mind. For current school families, the registration fee is waived only if the re-registration form and deposit of \$500 is submitted by the deadline given on the re-registration form.
9. I/We understand that if we have any tuition or fees still outstanding as of June 30<sup>th</sup> of the school year, my/our family may be placed on the waiting list of the school regardless of whether I/we have re-registered for the next school year.
10. I/We understand that report cards/transcripts and/or yearbook of students owing tuition at the end of the school year may be held back until all fees are paid. In addition, no senior student will be permitted to attend graduation exercises or receive a diploma unless the family's tuition payments are up to date.
11. I/We understand that continued failure to meet the above stated obligations or agreements with the Business Office ON TIME will result in Board action to consider refusal of enrollment for subsequent years.
12. I/We understand when a student is expelled or withdrawn at the recommendation of the school; tuition for the full month will be due up to and including the month of expulsion or withdrawal.
13. I/We understand that all unpaid tuition accounts from past years are still due to British Columbia Christian Academy, and failure to pay any fees by the due date may result in late fees and/or other penalties, including collection and legal fees.
14. I/We understand that all students must respect school property including textbooks. If my child/ren loses or damages any school property, I/we will be responsible to replace the item(s). Replacement of item(s) will be billed and payment will be processed through EFT.

### **CONSENT / SUPPORT**

\_\_\_\_(Initial) I consent to allow BC Christian Academy collect personal information that may include student identification, birth certificate, legal guardianship, court orders if applicable, parents' work numbers and email address, behavioral, academic and health information, most recent report card, emergency contact names and numbers, health insurance number and any similar information needed for registration.

\_\_\_\_(Initial) I further consent to the use and disclosure of information contained in this form and otherwise collected by or on behalf of BC Christian Academy, (1) for the purpose establishing, maintaining and terminating the student's or parent's relationship with BC Christian Academy, (2) for the additional purposes identified when or before personal information is collected, and (3) as otherwise provided in BC Christian Academy's Personal Information Privacy Policy, a copy of which is available on request. I also consent to the collection, use and disclosure of such personal information by and to agents contractors and service providers of BC Christian Academy.

### **EXTENDED STUDENT LEAVE REQUESTS POLICY**

BCCA understands that families may request extended leave during the school year; however, prolonged absences can affect student learning and the classroom community. As classroom learning and the teacher-student relationship are essential, extended leaves beyond a few days are generally not approved, except in cases of urgent medical needs or emergencies. Other requests may be reviewed on a case-by-case basis.

Please note that teachers are not expected to provide alternative learning materials for time missed. For full details, please refer to the policy on our website.

### **PROBATION POLICY**

All new students at BCCA are placed on a 90-day probationary period. This provides an intentional time for both the school and the family to prayerfully determine whether BCCA is the right academic, spiritual, and relational fit for the student and family (Philippians 2:1-4). It also ensures that the expectations outlined in the Parent & Student Handbook are clearly communicated, mutually understood, and consistently upheld.

Please refer to the full policy on our website or request a copy from the office.

### **I AGREE TO FULLY SUPPORT THE SCHOOL AND I GIVE PERMISSION FOR MY CHILD ON THE FOLLOWING AREAS:**

#### **FIELD TRIP PERMISSION**

\_\_\_\_(Initial) I consent to have our child attend British Columbia Christian Academy's field trips, exploratory trips and other school events such as the Camp Retreat, Ski-day, that provide invaluable learning experiences and social skills for students. If activities are medium to high risk, an additional permission form with detailed information will be provided. I do not hold British Columbia Christian Academy liable for any accident or injury to my child(ren) while participating in these events.

**PHOTOGRAPH & PUBLISHING CONSENT**

\_\_\_\_ (Initial) Throughout the school year photographs are taken of various student activities which may be published in the school newsletter, school annuals, or on the school website and other promotional materials. I give permission to B.C.C.A. to use any photos of my child(ren) for advertising purposes or in school publications.

I/We the undersigned solemnly declare that we have read and understood the policies and conditions relating to the Admissions Procedure, Tuition and Fee payments as described above. By signing below, I/we accept full responsibility for the payment of all tuition and student fees.

If BC Christian Academy finds any falsification of documents or information provided to the school, BC Christian Academy reserves the right to immediately withdraw the student (without refunds to any fees paid).

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**Parent/Guardian Signature****Date**

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**Parent/Guardian Signature****Date**

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**Principal's Signature****Date**

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**Start Date**



**STATEMENT OF FAITH**

Please read carefully British Columbia Christian Academy's Statement of Faith. Not all private schools are suitable for every family. It is important that each family attending this school agrees that they allow their children to be educated in accordance with the following:

- 1) We believe the Bible to be the inspired and only infallible, authoritative written word of God. II Timothy 3: 16-27
- 2) We believe that there is one God, eternally existent in three persons: Father, Son, and Holy Spirit. Matt. 28 19; II Cor. 13: 14
- 3) We believe that the universe originated by the creative act of God as revealed in Holy Scripture, and that the form of every kind of life was fixed at the time of its creation. Genesis 1: 1; John 1: 1
- 4) We believe in the true deity and true humanity of our Lord Jesus Christ - His pre-existence, His virgin birth, His sinless life, His miracles, His vicarious and atoning death through His shed blood, His bodily resurrection, His ascension to the right hand of the Father, and His future visible return in power and glory. Colossians 1: 13-20; John 1: 14
- 5) We believe that the Lord Jesus Christ is the only mediator between God and man. I Timothy 2: 5
- 6) We believe that all men are lost and sinful, and that salvation is received through personal faith in the Lord Jesus Christ and by the act of regeneration of life by the Holy Spirit of God. Romans 3: 23-26; Titus 3:5
- 7) We believe that by the present indwelling ministry of the Holy Spirit, the Christian is enabled to live a godly life, and that every believer should practice the holiness which God requires. Ephesians 1: 13-14; Romans 8: 1-4 , 12: 1-2; Titus 2: 11-13
- 8) We believe in the resurrection of both the saved and the lost; they that are saved unto the resurrection of life, and they that are lost unto the resurrection of damnation. John 5: 24-25, 28-29
- 9) We believe in the spiritual unity of believers in our Lord Jesus Christ. John 5: 20-23; I Corinthians 12: 12-13
- 10) We believe that God wonderfully and immutably creates each person as male or female. These two distinct, complementary genders together reflects the image and nature of God. Individuals cannot change their God-given biological sex or gender (Gen 1:26-27; Matt. 19:4; Mark 10:6)
  - a) We believe that God intends sexual intimacy to occur only between a man and a woman who are married to each other (1 Cor 6:18; 7:2-5; Heb 13:4)
  - b) We believe that God has commanded that no intimacy sexual activity be engaged in outside of a marriage to each man and a woman.
  - c) We believe that any form of sexual immorality (including adultery, fornication, homosexual behavior, bisexual conduct, bestiality, incest, and use of pornography) is sinful and offensive to God(Matt. 15:18-20; 1 Cor. 6:9-10).
  - d) We believe that every person must be afforded compassion, love kindness, respect, and dignity (Mark 12:28-31; Luke 6:31). Hateful and harassing behavior or attitudes directed toward any individual are to be repudiated and are not in accord with Scripture nor the beliefs and principles of BC Christian Academy.
  - e) We believe that the term "marriage" has its origin and meaning in Scripture. Marriage between one man and one woman for life uniquely reflects Christ's relationship with his Church (Gen 2:18-25; Eph. 5:21-33). This comprises the ideal environment for the nurturing and upbringing of children. It is foundational to a strong and united society and as such is to be fostered, strengthened, protected, and encouraged.
- 11) We believe that support of, and participation in, the task of fulfilling the great Commission is an obligation of all believes in our Lord Jesus Christ. Matthew 28:19-20

**I have read the Statement of Faith and understand these values will be taught to my child/children and will support these teachings.**

\_\_\_\_\_  
**Signature of Parent**

\_\_\_\_\_  
**Print name of Parent**

\_\_\_\_\_  
**Signature of Parent**

\_\_\_\_\_  
**Print name of Parent**

**PARENT CODE**

- I will pray earnestly for British Columbia Christian Academy. (Believing Families)
- I will cooperate fully in the educational functions of British Columbia Christian Academy, doing my best to make Christian education effective in the life of each of my children so that he or she may love and serve the Lord Jesus Christ all of his or her life.
- I have read the "Policies Relating to Tuition Payment" and agree to fulfill all my financial obligations to British Columbia Christian Academy on or before the due date in accordance with these policies. If unable to pay on time, I will notify the business office in advance (a) giving a reasonable explanation for the delay, and (b) stating when the payment can be made.
- I will encourage and help my children support the outreach projects of British Columbia Christian Academy as the Lord enables.
- I will undertake volunteer duties and responsibilities for British Columbia Christian Academy as opportunities arise and as God provides time and strength. (Refer to Parent Participation Program Policy for detailed information and requirements).
- I will regularly attend meetings and parents' functions of British Columbia Christian Academy. I will make an effort to attend the Annual Business and Semi-Annual Business Meeting.
- I will do my best to attend the Parent Orientation meeting when I have a child entering a division of the school for the first time.
- If I become dissatisfied with the school in any respect, I will seek to resolve the matter with the person or persons involved rather than begin to spread criticism or hold a negative attitude in my heart. (Matt.18:15-17)
- I will seek the advancement of British Columbia Christian Academy in all areas, i.e., spiritually, socially, academically and physically.
- I have read and agree with the Statement of Faith of the school and am willing to have my child(ren) educated in accordance with it.
- I support the Christian perspectives being taught at B.C. Christian Academy.
- I agree that the school reserves the right, in consultation with the parent(s), to place a child at the appropriate grade level.
- I agree that the school reserves the right to suspend or expel any student who (or whose parent/guardian) does not cooperate with the educational process, or the standards set by the school.
- I agree that the school reserves the right to expel or suspend any student whose lifestyle is not consistent with the school's Code of Conduct, or if there is failure to disclose relevant information concerning the student or family.
- I have read the Parent/Student Handbook and fully understand the commitment I am making.
- I understand that voting rights are reserved for BC Christian Society members only and that only believing families (as defined in the Statement of Faith) may be Society Members.

**My signature indicates that I have understood and agree to all the points of the Parent Code and fully accept the School's teaching of their Statement of Faith.**

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**Signature of Parent**

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**Print name of Parent**

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**Signature of Parent**

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**Print name of Parent**

## STUDENT CODE OF CONDUCT

At British Columbia Christian Academy we make it a top priority to live lives that please and honor God. Every student is expected to comply with the following guidelines and statements:

### Regarding the Lord

- I acknowledge that God's Word, the Bible, has supreme authority in my life and that my conduct at school will be measured against it (2 Timothy 3:16-17; Exodus 20:1-17; Deuteronomy 6:1-21).
- I will refrain from using God's name carelessly and without reverence (Exodus 20:7).
- I recognize that I am accountable to God for my actions (Romans 14:12; Matthew 12:36-37).

### Regarding Authorities

- I acknowledge that God has granted authority to leaders to help govern me (Hebrews 13:17; Romans 13:1-5; Titus 3:1-2).
- I recognize that while many things are permitted, the school has decided which things are beneficial for me while attending BCCA (1 Corinthians 10:23).
- I will submit to discipline, correction, and consequences as deemed appropriate by the school authorities (Hebrews 12:11).

### Regarding Others

- I will conduct myself with the interest of others in mind (Philippians 2:4; Matthew 22:39; 1 Corinthians 10:24).
- I will behave in such a way that will promote harmony and peace with my teachers and classmates and within the school (Romans 12:8; Proverbs 16:28).
- I will refrain from unwholesome talk (Ephesians 4:29; Ephesians 5:4).
- I will put my desires under biblical authority when it comes to relationships of the opposite sex (1 Timothy 5:1-2; Ephesians 5:3; 1 Corinthians 6:13b,18).

### Regarding Myself

- I will treat my body as a temple of the Holy Spirit and refrain from substance abuse of any kind as well as sexual immorality (1 Corinthians 6:19-20).
- I will not be swayed by or preoccupied by earthly things - things that are contrary to God's standard of righteousness (Romans 1:29-32; Galatians 5:19-21).
- I will actively set my mind on heavenly things (Philippians 4:8; Galatians 5:22-23).

## SMARTPHONE SMART SCHOOL POLICY

I understand that any electronic devices (including but not limited to smartphones, iPads, iPods, mobile gaming devices, smartwatches, etc.) are not to be taken to school. Any violation of this policy may result in the electronic device being confiscated.

I, \_\_\_\_\_ (print name), am aware of the school's Student Code of Conduct and the *Smartphone Smart School Policy*. I agree to follow and support both to the best of my ability. As a student attending BC Christian Academy, I promise to take responsibility for any violations of the Code of Conduct as well as agree to any discipline procedures the school may deem appropriate.

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Student Signature or Parent Signature (on behalf of K-Gr.4 Students)

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Date

**TUITION AND FEES 2026-2027**

<b>GRADES</b>	<b>OLDEST CHILD</b>	<b>SECOND CHILD</b>	<b>THIRD CHILD</b>	<b>STUDENT FEE</b>
<b>Elementary School</b> Kindergarten – Grade 4	\$7,750	\$4,160	\$2,960	\$150
<b>Middle School - Grades 5 - 8</b>	\$8,790	\$4,780	\$3,020	\$300
<b>High School - Grades 9 - 10</b>	\$9,620	\$5,040	\$3,120	\$350
<b>High School - Grades 11</b>	\$9,830	\$5,250	\$3,380	\$450
<b>High School - Grades 12</b>	\$9,830	\$5,250	\$3,380	\$550

MAXIMUM FAMILY RATE = \$17,600.

**Example of tuition fee calculation for multi-children family:**

<b>3 CHILDREN IN THE FAMILY</b>	<b>OLDEST IN GRADE 12</b>	<b>SECOND IN GRADE 8</b>	<b>THIRD IN GRADE 4</b>	<b>TOTAL FEES</b>
Tuition	\$9,830	\$4,780	\$2,960	\$17,570
Activity Fees	\$550	\$300	\$150	\$1,000
<b>Total Family Fees →</b>				<b>\$ 18,570</b>

**TUITION FEES PAYMENT OPTIONS: (Please choose one)**

- Lumpsum payment.** Full tuition payment option, and if paid in full by first week of school, you are eligible for a discount of 2%.
- 10 Monthly payment:** Must complete EFT (Electronic Funds Transfer) form and return with a voided cheque. Tuition and Fees will be paid September 1, 2026, to June 1, 2027, and first payment will include Student Fees.
- 12 Monthly payment:** Must complete EFT (Electronic Funds Transfer) form and return with a voided cheque. Payments will be debited from your bank account from July 1, 2026, through June 1, 2027.

**OTHER FEES:**

- Registration Fee:** \$250.00 per family must be submitted with application. This fee is non-refundable.
- Student Fee:** \_\_\_\_\_ See grid above for appropriate fee for your child according to their (K - 12) grade.

**OTHER OBLIGATIONS:**

- Parent Participation Program:** Participating families must fulfill a total of 20 hours of volunteer work, separated into two semesters - 10 hours by JANUARY 31st and another 10 hours by JUNE 30<sup>th</sup> 2027. Complete the PPP form and submit along with a voided cheque. If there are any PPP hours left unfinished by the end of a semester, they will be charged at \$20 per hour and paid using Electronic Funds Transfer (EFT).
- School Property including Textbooks:** If a student loses and/or damages any school property including textbooks, parents/guardians are responsible to pay \$200/student (up to \$500/family) for the replacement of the lost or damaged items. This amount will be deducted from your bank account (see PPP/Textbook deposit EFT form for more details).

**WITHDRAWAL:**

- When a student voluntarily withdraws from the school for any reason, two (2) full school months' notice must be given. In lieu of notice, a one (1) month tuition penalty will apply.

I/We have read, understand and agree to pay all applicable fees as described above on the due date. I/We also understand and agree that failure to pay any fees by the due date may result in late fees and/or other penalties, including collection and legal fees.

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Print name of Parent

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Print name of Parent

\_\_\_\_\_  
Name of Children

\_\_\_\_\_  
Date

**MEDICAL DECLARATION FORM**

EMERGENCY CONTACTS (PLEASE LIST 2 PEOPLE OTHER THAN PARENTS):

NAME	PHONE NUMBER	RELATIONSHIP:	CAN PICK UP?	I CONFIRM THAT THESE EMERGENCY CONTACTS UNDERSTAND AND SPEAK ENGLISH:
				Initial:
				Initial:

**MSP / EXTENDED HEALTH INSURANCE INFORMATION**

PERSONAL HEALTH NUMBER: <small>(obtainable after 3 months in BC)</small>	
PRIVATE MEDICAL INSURANCE POLICY #:	Coverage from: _____ to _____

*\*Students must always have adequate insurance coverage. Private medical insurance is required until MSP coverage is obtained*

**EMERGENCY MEDICAL CARE NOTICE**

I/We acknowledge and agree that the school will administer basic first aid to my/our child in the event of an accident, injury, or medical emergency while they are in the care of the school. I/We understand that school staff will act in the best interest of my/our child and will contact parents/guardians as soon as reasonably possible. I/We also understand that, if necessary, the school may seek further medical assistance, including contacting emergency services.

**IMMUNIZATION**

Please provide a copy of immunization records. You may have to contact your physician for a record if you do not have a copy of immunizations, he/she has given to your child. Please keep the office informed of any additional immunizations done after providing this record.

**MEDICAL HISTORY**

1. Is the student currently taking any medication on a regular basis? If yes, please provide the name(s) of the medication.

Yes  No

Name of Medication: \_\_\_\_\_

2. Will the need to take this medication while at school?

Yes  No

3. Does the student have a history of previous medical concerns or surgery? If yes, please provide details.

Yes  No

Details: \_\_\_\_\_

4. a) Does the student have any known allergies? If yes, please name allergies:

Yes  No

Allergies: \_\_\_\_\_

b) Symptoms that student has experienced during an allergic reaction:

\_\_\_\_\_

**5.** Has the student ever suffered an allergic reaction that has caused him/her to experience breathing difficulties, dizziness, fainting, or shock? If yes, please provide details:

**Yes**     **No**

Details: \_\_\_\_\_

**6.** Has the student ever had need of oral (tablet or liquid) or injectable medication for an allergic reaction? If yes, please provide details:

**Yes**     **No**

Details: \_\_\_\_\_

**7.** Please use this space if there is anything else you want us to know about the student

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

Please be assured that if a student requires assistance due to a medical emergency, the school will make every effort to inform the parents or guardians immediately. The student will receive prompt care regardless of whether contact is successfully made.

In the event of a medical emergency, the school will attempt to contact the parents or guardians to arrange for the child to be picked up or to receive instructions on the appropriate course of action. If the parents or guardians are unavailable, the designated emergency contacts will be notified. Should the school be unable to reach any contact person, the school will take action as deemed necessary and will continue efforts to contact the parents or guardians until successful.

\_\_\_\_\_  
**Parent / Guardian Signature**

\_\_\_\_\_  
**Print name of Parent**

\_\_\_\_\_  
**Parent / Guardian Signature**

\_\_\_\_\_  
**Print name of Parent**

\_\_\_\_\_  
**Date**

**LEGAL RESIDENCY OF PARENT OR COURT APPOINTED LEGAL GUARDIAN**

To be completed and signed by a parent or legal (court-appointed) guardian. If legal guardian, attach a copy of the court order appointing you as legal guardian.

**LAWFULLY ADMITTED INTO CANADA (STATUS OF PARENT OR LEGAL GUARDIAN ONLY):**

I am (please X one):

- A Canadian citizen (please attach photocopy of Canadian or Citizenship Certificate of Parent)
- A Permanent Resident (landed immigrant) (attach photocopy of landed immigrant status paper or P.R. card of Parent)
- Lawfully admitted into Canada under one of the following documents (please mark the appropriate box below and attach photocopy of document):
  - Admission as a refugee claimant
  - A person claiming refugee status who has a letter of no objection
  - Student authorization (student visa) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
  - Employment authorization (working permit) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
  - A person carrying out official duties as a diplomatic or consular official (with a foreign representative acceptance counter foil in his/her passport)
  - Other – document description (must be cleared with Immigration Canada): \_\_\_\_\_

**RESIDENCY IN BRITISH COLUMBIA (OF PARENTS ONLY)**

- Yes, I am a resident of British Columbia

Residence Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

- No, I am not a resident of British Columbia

**CONFIRMING SIGNATURE:**

Parent's/Legal Guardian's Signature: \_\_\_\_\_

Parent's/Legal Guardian's Name: \_\_\_\_\_

Parent's/Legal Guardian's Name: \_\_\_\_\_

Student name: \_\_\_\_\_

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

**INCLUSIVE EDUCATION (IE)**

Student:	Incoming grade:
Date of Birth:	Age:
Previous School:	

Dear Parent:

Please indicate whether you or a professional have observed, provided support for, or diagnosed your child with difficulties or a disorder in any of the following areas. (Please mark all that apply.)

<input type="checkbox"/>	Speech & Language concerns i.e. disfluency, not able to follow directions
<input type="checkbox"/>	Reading and Spelling
<input type="checkbox"/>	Math computations, word problems
<input type="checkbox"/>	Written Output
<input type="checkbox"/>	Comprehension
<input type="checkbox"/>	Memory and processing speed
<input type="checkbox"/>	Socio-emotional concerns (anxiety, tics, peer socialization)
<input type="checkbox"/>	Behavior (inattention, hyperactivity, distractibility)
<input type="checkbox"/>	Gross/fine motor skills (i.e. handwriting, motor coordination)
<input type="checkbox"/>	Any other medical condition (that will require classroom support)

As such, we would greatly appreciate receiving copies of any reports, diagnoses, or assessments from your child's previous school, therapists, and/or doctors. Please indicate which documents are applicable to your child and submit them to the Admin Office at your earliest convenience.

<input type="checkbox"/>	School Reports on Special Programs
<input type="checkbox"/>	ASD Reports
<input type="checkbox"/>	Learning Support Plan
<input type="checkbox"/>	Individual Education Plan
<input type="checkbox"/>	Anecdotal/Observation Reports from the School
<input type="checkbox"/>	Pediatrician's Diagnosis
<input type="checkbox"/>	Psycho-educational Assessment
<input type="checkbox"/>	Speech & Language Assessment Report
<input type="checkbox"/>	Occupational Therapy Assessment/Report
<input type="checkbox"/>	Physiotherapy Assessment/Report
<input type="checkbox"/>	Audiologist's Assessment/Report
<input type="checkbox"/>	Vision Therapy Assessment/Report

	Behavior Consultant's Report
	Counselor/Psychiatrist's Report
	Others: (please specify)

At present, our Inclusive Education roster is full. However, if you wish to be placed on a waitlist, we will keep the submitted documents on file until we are able to consider your child's application. If we are unable to provide services for your child, the documents will be returned. Please be assured that we will handle your child's application and all related documents with the strictest confidentiality.

Check this box if none of the above apply to your child.

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**Parent / Guardian Signature**

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**Print name of Parent**

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**Parent / Guardian Signature**

---

**Print name of Parent**

---

**Date**

By checking this box and typing my name in the fields above, I am electronically signing my application.