

SOUTHPOINTE ACADEMY APPLICATION FORM



(Please complete one application for each student)

STUDENT INFORMATION:

Date of Application:

Full Name:
First Middle Last

Preferred Name: **CARE CARD NUMBER** :

Applying to Grade: Starting Sept. of: Date of Birth: ... / ... / ...
Month Day Year

Sex: M F Place of Birth: Language spoken in the home:

Citizenship: Canadian Citizen Landed Immigrant Other (please specify)
Immigration status: non-Canadians must submit proof of Landed Immigrant status for students and parents with application.

EDUCATION:

Present School: Phone #:

Date of Enrolment: Fax # :

Address:

ADDITIONAL INFORMATION:

Sports/Teams:

Arts/Music:

Other Organizations (Volunteering/Community Service:)

Interests:

Name two aspects of school life that are most important to you, the student.

To be completed by the student: (Grade 4 and up)

Where did you learn of Southpointe Academy?

Is Southpointe Academy your first choice of school? Yes No

Has the Applicant ever been suspended, expelled or been required to withdraw from any previous school?

Yes No

Please name any current Family that recommended us to you.

APPLICATION FORM



PARENT & FAMILY INFORMATION:

Student resides with: Both Parents Father Only Mother Only Guardian

To whom should Southpointe Academy Correspondence be sent?

Both Parents Father Only Mother Only Guardian

FATHER *or* *GUARDIAN*

Personal cell phone:

Full Name:
Title (Mr./Dr. etc.) *First* *Middle* *Last*

Address:
Street *City* *Postal Code*

Home Phone: Home Fax: Home Email:

Employer:

Occupation/Profession:

Bus. Phone: Bus. Fax: Bus. Email:

Citizenship: Canadian Citizen Landed Immigrant Other (please specify)

MOTHER *or* *GUARDIAN*

Personal cell phone:

Full Name:
Title (Mr./Dr. etc.) *First* *Middle* *Last*

Address:
Street *City* *Postal Code*

Home Phone: Home Fax: Home Email:

Employer:

Occupation/Profession:

Bus. Phone: Bus. Fax: Bus. Email:

Citizenship: Canadian Citizen Landed Immigrant Other (please specify)

Sibling Information:

Full Name: Age: Current School

Full Name: Age: Current School

Full Name: Age: Current School

Names and relationships of relatives or friends, if any, who have attended or are attending Southpointe Academy.

APPLICATION FORM



Southpointe Academy – Parent/Child Declaration:

I have read and understand the following:

- a) This application does not automatically admit the candidate to Southpointe Academy. The academic transcript, interview and testing results, personal recommendations, and the availability of space are taken into consideration prior to admission.
- b) Full disclosure of all information pertinent to the student's application (academic, social, etc.) is expected. Failure to do so could result in withdrawal of an offer of admission.
- c) All fees are payable in advance (including the registration fee). All fees are non-refundable.
- d) Enrolment is for the full academic year. If parents withdraw a student before the year ends, they remain responsible for the full year's tuition.
- e) Upon acceptance, I agree to pay the applicable entrance fee, all tuition fees and activity costs and abide by the billing options outlined in the Schedule of Fees.
- f) I understand, as does my son/daughter to the extent that age permits, that enrolment at Southpointe Academy is conditional on him/her demonstrating and maintaining self discipline, tolerance towards others, and attributes of good character.
- g) I agree to support the procedures, rules, and values of the school.

Summary:

Southpointe Academy is an educational enterprise serving a community of students, teachers, and parents. The success of the enterprise relies on all parties being fully committed to and contributing members of the school. For example, among other attributes of the school, students and parents are expected to uphold:

The physical and psychological well-being of all other parties,

The goals of the school and individual students,

The focus on academic rigour, truth, trust, and honesty,

The school's programs (academic, athletic, and co-curricular).

If, in the opinion of the Headmaster of Southpointe Academy, a student's participation in the school is not in the best interests of either the school or the student, he/she will be required to withdraw from the school at a time (possibly during the school year) determined by the Headmaster.

Signed:

Signed:

.....
Parent /Guardian

.....
Student

Date:

Date:

- | |
|--|
| <p>**PLEASE ENCLOSE**:</p> <ul style="list-style-type: none"><input type="checkbox"/> \$300.00 Application Fee (non-refundable)<input type="checkbox"/> Recent Photograph of Applicant<input type="checkbox"/> Most Recent School Report<input type="checkbox"/> Photocopy of Birth Certificate<input type="checkbox"/> Legal Residency of Parent – (Form A, on next page, and a copy of a parent Driver's License) |
|--|

APPLICATION FORM



FORM A – LEGAL RESIDENCY OF PARENT

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

Lawfully Admitted into Canada

1. I am (please select one)

- A Canadian citizen (if not born in Canada, please attach a photocopy of citizenship paper/card)
- A Landed Immigrant (attach photocopy of landed immigrant status paper)
- Lawfully admitted into Canada under one of the following documents (please mark the appropriate box below and attach photocopy of documents):
 - Admission as 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 counterfoil in his/her passport)
 - Other - Document description (must be cleared with Immigration Canada)

Residency in British Columbia

2. I am a resident of British Columbia (please select one)

- Yes Residency address:
.....
.....
- No I am not a resident of British Columbia

Confirming Signature

3. Parent/Legal Guardian's name:
Parent/Legal Guardian's signature:
Date:

The use of this form is recommended by the Independent Schools Branch, Ministry of Education-British Columbia, Canada