

International or Visa Student

SIBLING APPLICATION FORM FOR ACADEMIC YEAR 2012 - 2013

STUDENT INFORMATION

Student Name: (Last Name)		(First Name)	(Middle)	(Preferred)	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth:	Place of Birth:	Country of Citizenship:			
Address:					
City:	Province:	Postal Code:			
Home Phone:	Family Email: (For school newsletters and notices)				

PARISH INFORMATION

Our Lady's Church registered member:					
<input type="checkbox"/> Yes, member since:	Envelope number:	Home Parish if not Our Lady's Church:			
Date of Baptism:	Church (Name/City)				
Has your child received Sacrament of:					
Reconciliation <input type="checkbox"/> Yes <input type="checkbox"/> No	Communion <input type="checkbox"/> Yes <input type="checkbox"/> No	Confirmation <input type="checkbox"/> Yes <input type="checkbox"/> No			

PARENTAL/EMERGENCY CONTACT INFORMATION (All information below must be completed.)

Father's Name:		Citizenship:	Religion:		
Address: (if same as child's, please leave blank.)					Home Phone:
Employer:			Occupation:		
Work Phone:	Cell Phone:	Email:			
Mother's Name:		Citizenship:	Religion:		
Address: (if same as child's, please leave blank.)					Home Phone:
Employer:			Occupation:		
Work Phone:	Cell Phone:	Email:			

In the event of a serious emergency (fire, earthquake, etc) and I cannot be contacted, my child(ren) may be released into the custody of:

Emergency Contact Name(s)		Relationship to Student:
Home Phone:	Work Phone:	Cell Phone:

MEDICAL INFORMATION:

Doctor's Name	Phone:	Care Card Number/Health Care:
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For international or visa students, please provide copy of private insurance coverage.

Medical Concerns: (allergies, epi-pens, diabetes, list any medications)

SCHOOL PREVIOUSLY ATTENDED:

Name:	Address:	Grades:
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I consent to having Our Lady's School collect personal information that may include student identification information, birth certificate, legal guardianship, court orders, if applicable, parents' work numbers & email address, behavioral, academic & health information, most recent report card, emergency contact name & number, doctor's name & number, health insurance number & any similar information needed for registration. *This information is required in order to register your child at this school and assist the school in making an informed decision as to your child's suitability and appropriate placement in the school. It will also allow the school to respond immediately to an emergency.* I certify that the above information is correct.

Signature of Parent/Guardian

Date:

Checklist

Office

- Application Form Received: _____
- Copy of Baptismal Certificate: Catholic Other: _____
- Copy of Birth Certificate _____
- For students NOT born in Canada:** *Copy of proof of Canadian citizenship (passport) or Permanent Resident Card or Record of Landing OR* _____
- For Foreign Students:** *Photocopies of passport pages clearly showing the passport no., dates of issue & expiry, name & date of birth. If presently in Canada, include a photocopy of the stamp made by Canadian authorities of most recent entry into Canada PLUS a photocopy of current immigration document.* _____
- Proof of Citizenship of **BOTH** parents regardless of nationality. Acceptable documentation include Birth Certificate, Citizenship Certificate, Permanent Resident Card, Record of Landing, or Passport showing name, date of birth & passport number. _____
- Legal Residency of Parent Form _____
- Immunization Information for the Vancouver Health Authority _____
- Students entering Grade 1 – 7 must submit a copy of their most recent report card. _____

Received by:	Date:	File:
Office Use:		

Legal Residency of Parent - FORM A

(If parents are deceased, use Form B)

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).

1. I am (please one):

- A Canadian citizen (if not born in Canada, please attach photocopy of citizenship paper/card)
- A landed immigrant (attach photocopy of landed immigrant status paper)
- Lawfully admitted to 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)

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

- Yes

Residency Address: _____

- No, I am not a resident of British Columbia

3. Parent's/Legal Guardian's Name: _____

Parent's/Legal Guardian's Signature: _____

