

 White Rock Christian Academy
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New	Family			
Application				

Student Name:	
Applying for Grade:	
In school year:	

## **Admissions Process**

Step 1:

Submit completed application and pay the application fee (\$50 per student to a maximum of \$100 per family).

Step 2:

Attend an admissions interview which will be scheduled by our Admissions Office after review of your application. Please note that no interview will be scheduled until a complete application has been received (see checklist below).

Step 3:

On receipt of an official acceptance letter, submit the non-refundable enrolment deposit (\$200 per student to a maximum of \$400 per family) which confirms your intention to enroll your student(s) at WRCA and holds the seat(s) in their class(es) for September. This deposit will be applied toward September's tuition.

## **Application Checklist**

Note: All "per student" and "per family" items must be received before your application will be reviewed.

Per Student

- □ Student Profile (pg. 1-2)
- □ Standard of Conduct (pg.3)
- □ Student Faith Commitment (pg. 4)
- $\hfill\square$  Responses to Student Faith Commitment questions (K-Gr12 only)
- $\Box$  Privacy Policy Consent Form (pg. 5)
- $\hfill\square$  Legal Residency of Parents Form (pg. 6)
- □ Supporting documentation for Legal Residency of Parents Form e.g., Copy of parent's Canadian passport, citizenship card, permanent resident card & landing papers or work permit.
- Copy of student's Canadian birth certificate showing parents' names, OR non-Canadian birth certificate (including English translated copy) AND passport (if not born in Canada)
- Copy of student's immunization record
- 🗌 Copy of student's most recent report card (Grades 1-12) or progress report from pre-school / kindergarten
- $\hfill\square$  Application fee (\$50 per applicant to a maximum of \$100 per family)

Additional Items:

 $\square$  \$100 language assessment fee (if determined necessary upon review of your application)

## Per Family

- □ Family Profile (pg. 7-8)
- □ Grandparents' Address Form (pg. 9)
- □ Pastoral Reference Form (pg. 10)



## STUDENT PROFILE

Student's Name	ent's Name: Legal Last Name Legal First Name			Legal Middle Name	
	Usual Last Name (if different)	Usual First Name (if diff	erent)		
Gender:	Date of Birth:	Place of Birth:	City	Co	untry
Country of Citiz	enship:				
Personal Health	Number (Care Card):				
Requested Grad	e Placement: For	Month	Year	_	
List chronologic	ally all previous schools attended,	including Kindergarte	en.		
	NAME OF SCHOO	DL		Year(s)	Grade(s)
Previous acader	nic achievement has been:				
Superio	r 🗌 Above average 🗌	Average 🗌 Bel	ow Average		
	ever received any learning assista No Explain:	nce, ESL training, spec	cial education	n instruction o	r counselling?
Has the student	ever repeated a grade or been reta	ined? 🗌 Yes 🗌	No		
If yes, state at w	hich grade level and explain reaso	ns:			
	ever been suspended or expelled? hich grade level and explain reasor		No		
How many days	of school did the student miss last	tyear? Expla	in:		

Describe any physical, mental or emotional disabilities (heart, hearing impaired, speech impediment, nervous condition, etc.): \_\_\_\_\_

Describe your child's personality (shy, nervous, outgoing, strong-willed, cooperative, confident, etc.):

MEDICAL INFO	ORMATION				
Does your child	have any LIFE-THREATENING allergies or illness?	Yes No			
[If Yes, please upload a doctor's note stating the diagnosis and emergency procedures instructions for the school.					
Does your child	have any NON-life-threatening allergies or illness?	🗌 Yes 🔲 No			
Please describe:					
	ical information would help us understand your ch on, development, etc.)?	· · · · ·			
Has your child b	een referred to any specialists (allergist, eye doctor	, hearing, pediatrician, etc)?			
Has your child e	ver received any diagnostic testing? 🔲 Yes 🗌	No			
Dates of testing (	if applicable):				
Is this information	on available to the school? $\Box$ Yes $\Box$ No				
Explanation:					
your child?	such as the Child Development Centre, health clini				
□ Co □ Co	opy of student's birth certificate (with parents' name opy of student's most recent report card opy of student's immunization record opies of any relevant reports from specialists (if app				
Parent/Guardian	Signature:	Date:			