



THE KING'S *School*

P O Box 28, 21783-76B Avenue, Langley BC V0X 1T0
Tel: (604) 888 0969 Fax: (604) 888 0977
Email: school@tkc.com Web site: www.thekingsschool.org

INTERNATIONAL STUDENT APPLICATION FORM

The school reserves the right to determine the family with whom the student will stay, even if friends of the family are resident in the Vancouver area. No student will be permitted to live on their own since not only is he/she in Canada to study but also to integrate into Canadian society and culture.

Please note that all International students applying for enrolment in grades 10, 11 or 12 must have sufficient English language fluency to enable them to participate in all academic subjects at those grade levels.

APPLICATION PROCEDURE AND POLICIES

- 1 **All students who wish to enroll must complete the application form. THE COMPLETED FORM MUST BE ACCOMPANIED BY –**
 - Two passport photos
 - Photocopy of the student's birth certificate
 - Photocopies of their school transcript (report cards) for previous two years and reports for this year to present
- 2 In addition to the above we also request that the following documents be submitted **if possible**. These documents will increase the applicant's prospects for acceptance.
 - A letter of recommendation (in English) from the student's present Headmaster
 - A letter of reference (in English) from the student's present pastor or minister
- 3 Within three weeks of receipt of the completed, signed application form the school principal will inform (in writing) the prospective student's parents or guardian of the decision reached by the School Board and school administration.
- 4 Upon acceptance of the application, the parents or guardian must remit the following amounts to The King's School:
 - a) A non-refundable application fee in the amount of \$250 Canadian for each child.
 - b) A tuition fee deposit in the amount of \$1,000 Canadian for each child.
 - c) Homestay finding fee of \$250 Canadian. This is only to be paid if the school needs to find a homestay for the student.
- 5 Upon receipt of the applicable amounts in (4) above, the school will issue "A Letter of Acceptance" and a receipt for the amounts paid.

The family and student can then take the Letter of Acceptance to Canada Immigration in their home country and apply for a Student Authorisation to enter Canada as a student registered in this school. Approval can sometimes take up to three months or longer.

- 6 Upon issuance of the Letter of Acceptance, the full balance of tuition fees for the academic year becomes due and payable to the school in order to complete the enrolment process. Annual tuition fees payable for the 2008-2009 school year are as follows –

First child - \$12,000; Additional children from the same family - \$11,000

REFUND POLICY

1. A full refund of all amounts will be given if the student applies to Canada Immigration for a Study Permit within three weeks of the date the Letter of Acceptance is issued, and is refused a Study Permit to attend the school. A copy of the letter of refusal from Canada Immigration is required.
2. After a Study Permit is issued, if the student withdraws from the school prior to May 1st, there will be a refund of all amounts except the Application Fee and the Tuition Deposit of \$1,000.
3. After a Study Permit is issued, if the student withdraws from the school on or after May 1st and prior to the commencement of the program, two thirds (2/3) of the Tuition Fees are refundable.
4. If a student withdraws after commencement and within the first calendar month of the program, one half (1/2) of the Tuition Fees are refundable.
5. If a student withdraws after the first calendar month of the program there is no refund of Tuition Fees.

ACCOMMODATION

The cost of room and board with a family is on average \$700 per month. The homestay family is carefully reviewed by the school. Please note that the monthly fee is a flat rate and must be paid even though the student returns home during the Christmas and Spring vacations.

LIVING EXPENSES

Each student should have approximately \$10 000 Canadian funds per year to cover miscellaneous expenses such as school uniform, school supplies, personal clothing/toiletries, restaurant meals, personal entertainment, etc.

VISAS

If students wish to travel to the United States, they need to contact the United States consulate in their home country before coming to Canada. It is not possible to enter Canada as a visitor and obtain a Study Permit within Canada.

ARRIVAL IN CANADA

A minimum of three week's notice must be given to the school prior to the student's arrival in Canada.

ACADEMIC PLACEMENT

Should the portion of the application (Statement of Faith, and Personal Goals) handwritten by the student not accurately reflect the actual English competency of the student, The King's School reserves both the right to have the student's family or guardian place the student in an alternate school for the remainder of the school year and to retain the tuition fee deposit.

Should academic results indicate a misplacement, The King's School also reserves the right to place any International student in a grade other than that being applied for.

HOLIDAYS AND ABSENCES

Students are expected not to extend their visits home beyond the set days of each break. If, under exceptional circumstances, a student will be away longer than the allowed time, he or she must get prior authorisation from The King's School.

INTERNATIONAL STUDENT APPLICATION

FOR OFFICE USE ONLY

Date Application Received

Accepted: Yes No

Acceptance Letter Issued

Received: Passport Photos (2)

Photocopy of Birth Certificate

Previous School Reports

\$250 Application Fee

\$1,000 Tuition Deposit

Date of application

STUDENT INFORMATION

Student (Legal name)	Last	First	Middle
Grade entering	Age	Birthdate (Y/M/D)	
Place of birth			Male <input type="checkbox"/> Female <input type="checkbox"/>
School year applying for -	Canadian name		

PARENT INFORMATION

Father's name	
Mother's name	
Address in home country	
Telephone (home)	Fax (home)
E-mail (home)	
Business/company name	
Telephone (business)	Fax (business)
E-mail (business)	

GUARDIAN OR OTHER CONTACT INFORMATION

Contact person in Vancouver area	
Relationship to prospective student's family	
Home address of contact person	
Telephone (home)	
Business address of contact person	
Telephone (business)	Fax (business)
E-mail (home)	Email (business)
Is this person appointed by the family as the Guardian of the prospective student while the latter is studying at The King's School? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Has the family provided this person with a letter prepared by a lawyer or notary public, appointing this person as the Guardian? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Please attach a copy of this letter to the application.	

PREVIOUS SCHOOL INFORMATION

Please indicate the name of the school your child is now attending, or attended last year	
Address	
Grade completed	
Name of Principal	
Telephone	Fax
E-mail	

STUDENT BACKGROUND

What reason do you have for wanting your child to attend our school?

Does your child want to attend our school? Yes No

Why?

Has your child ever repeated a grade? If yes, which one? Yes No

Has your child ever participated in specially advanced classes? Yes No If yes, what classes?

Has your child ever had any mental, physical, or emotional disorders? Yes No
If yes, please explain.

What things does your child have a natural interest in?

What are his/her favourite pastimes or hobbies?

Does your child have any habits or activity patterns that might serve to give us early warning that they are feeling troubled or stressed

Please note any additional information which would assist the school in knowing this student as an individual.

MEDICAL INFORMATION

Name of student _____

Medical Coverage

Do you have or will you be applying for BC Medical Insurance? Yes <input type="checkbox"/> No <input type="checkbox"/>		
BC Personal Health Care Number _____		
Other Medical Insurance Plan Information	Name of Company	Policy Number
Family Doctor	Telephone	
Family Dentist	Telephone	

Emergency Contacts

Name	Relationship	Telephone
1.		
2.		
3.		

Other Information

Is the student currently taking any medication on a regular basis? Yes No

Please provide the names of the medication -

Will the student need to take this medication while at school? Yes No

Does the student have a history of previous medical concerns or surgery? Yes No

Please provide details

Does the student have any known allergies? Yes No

If yes, please name allergies -

Symptoms that student has experienced during an allergic reaction are -

Has the student ever suffered an allergic reaction that has caused him/her to experience breathing difficulties, dizziness, fainting or shock? Yes No

Provide details -

Has the student ever had need of oral (tablet or liquid) or injectable medication for an allergic reaction?
 Yes No If yes, please contact the school for an additional form.

Please indicate if your child has had any of the following:

	Yes	No		Yes	No
Head or Neck Injuries			Asthma		
Muscle, bone or joint disease			Allergies		
Hernia			Chickenpox		
Tonsils/Adenoids removed			Rubella (German Measles)		
Impaired Vision			Red Measles		
Fainting Spells			Pneumonia		
Convulsion Disorders			Scarlet Fever		
Delayed development of bladder or bowel control			Whooping Cough		
Kidney disease			Mumps		
Diabetes			Hearing Problems		
Heart Condition			Rheumatic Fever		

Immunization Summary

Please indicate whether your child has been immunized against the diseases listed below, by entering dates from your records, if possible.

Pertussis (Whooping Cough)	Diphtheria & Tetanus	Polio (Oral or Injection)	Other Immunizations	
			Type	Date

Please rest assured that if the student is in need of assistance for a medical emergency, the school will attempt to inform you as soon as possible. The student will, however, be promptly cared for. In the case of a medical emergency, the school will attempt to contact the guardian to pick up your child or for direction as to what action to take. If the guardian is unavailable, the homestay contacts will be notified. If the school is unsuccessful in reaching a contact person we will take action as deemed necessary and keep trying to make contact with the guardians until successful.

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

 Signature of Student

 Signature of Parent/Guardian

 Date

Privacy

In order that The King's School may comply with the requirements of the Privacy Laws under the "Personal Information Protection Act (British Columbia)", we request that parents sign the following consent forms:

1. I consent to having The King's School collect personal information that may include student identification information, birth certificate, legal guardianship, court orders if applicable, parents' work numbers and e mail address, behavioural, academic and health information, most recent report card, emergency contact name and number, doctor's name and number, health insurance number and any similar information needed for registration.

I further consent to the use and disclosure of information contained in this form and otherwise collected by or on behalf of The King's School (1) for the purpose of establishing, maintaining, and terminating the student's or parent's relationship with The King's School, (2) for additional purposes identified when or before personal information is collected, and (3) as otherwise provided in The King's School'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 The King's School.

This information is required in order to register your child at this school and assist the school authority 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. For more information, the privacy officer for The King's School is Mr Don Craig and may be reached at 604 888 0969.

Parent's signature

Date

2. I consent to having photographs and work samples of my child(ren) used by The King's School in the yearbook, newsletters and other promotional material.

Parent's signature

Date

3. The school may prepare a family phone list (car pool list, class list, etc.) for a family phone directory. If you DO NOT want your phone number and address included, please indicate: No

Parent's signature